

Exhibit 35

FROM
MICROCYTIC CELLS
TO
MACROCYTIC \$ALES

REGIONAL TRAINING WORKSHOP

Wyndham Hotel - Greenspoint
12400 Greenspoint Drive
Houston, Texas 77060
713-875-2222
December 1-3, 1992

Plaintiffs' Exhibit
270
01-12257-PBS

ORTHO 01050314
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MDL-OBI00062507

Participants

Dan Smith
Bob VanArsdall
SharRon Jamison
Lecia Scott

Houston Division Manager
National Accounts Manager
Regional Trainer
Regional Trainer

Houston Division:

Barbara Goodman
Phil Gray
Donna Henderson
Michael Williams

Dallas Division:

Carl Kincaid
Cathy Merrick

Atlanta Division:

Jeanne Bell
Bill Bowden
Holt Robinson
Vern Webb

Florida Division:

O'Neal Montgomery
Craig Phillips

Carolina Division:

Bob Bischoff
David Jones
Merideth McRae

Philadelphia Division:

Jo Ellen Friedman

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REGIONAL TRAINING WORKSHOP

AGENDA

December 1, 1992

12:00 - 1:00

Lunch

1:00 - 5:00

WIN WIN Negotiations

**Baker Communications
- Christine Parker**

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REGIONAL TRAINING WORKSHOP

AGENDA

December 2, 1992

Managed Health Care

Bob VanArsdall

- | | |
|---------------|--|
| 7:30 - 8:00 | Continental Breakfast |
| 8:00 - 8:30 | Institutional Managed Health Care Overview |
| 8:30 - 9:45 | Purchasing Decision <ul style="list-style-type: none">- The Market- Group Purchasing Organizations (GPO)- Health Maintenance Organizations (HMO)- Home Health Care (HHC) |
| 9:45 - 10:00 | Break |
| 10:00 - 12:00 | Targeting Accounts <ul style="list-style-type: none">- General Information- Goal Setting- Prime Vendors/ Accounts- Resources |
| 12:00 - 1:00 | Lunch |
| 1:00 - 3:00 | Getting the Business <ul style="list-style-type: none">- Strategy- Value of Programs- Value Plan- T-Bar and Other Programs |
| 3:00 - 3:15 | Break |
| 3:15 - 5:00 | Growing the Business <ul style="list-style-type: none">- Relationship Building- Programs- Service- Future Calls |

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REGIONAL TRAINING WORKSHOP

AGENDA

December 3, 1992

- | | | |
|---------------|--|-----------------|
| 7:30 - 8:00 | Continental Breakfast | |
| 8:00 - 9:00 | Reimbursement Workshop <ul style="list-style-type: none">- Programs- Sectors- Questions and Answers | Dan Smith |
| 9:00 - 11:00 | Dispensing Physicians <ul style="list-style-type: none">- History- Physician/Staff- Servicing Accounts- Oncology Suppliers- PACT/Reimbursement Programs- Individualized Presentations- Trends | SharRon Jamison |
| 11:00 - 12:00 | Distributor Workshop <ul style="list-style-type: none">- Class of Trade- Key Personnel- Return Goods Management- Programs- Skill Building- Objections | Lecia Scott |
| 12:00 - 1:00 | Lunch | |
| 1:00 - 2:00 | Retail Workshop <ul style="list-style-type: none">- Call/Targeting Activity- Medical Reimbursement- Retail Binder- Feature/Benefit Selling- Support Materials- Definitions- Skill Building- Objections | Lecia Scott |

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December 3, 1992 (continued)

2:30 - 2:45	Break	
2:45 - 3:30	Question and Answer Open Forum	Dan Smith
3:30 - 4:00	Follow-up Training	Dan Smith
4:00	Closing	

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REIMBURSEMENT

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PROCRIT® REIMBURSEMENT PROGRAMS

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PROCRIT REIMBURSEMENT PROGRAMS

- **PROCRITLINE**
- **FAP- FINANCIAL ASSISTANCE PROGRAM**
- **CSP- COST SHARING PROGRAM**
- **REIMBURSEMENT ASSURANCE PROGRAM**

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PROCRITLINE

HOTLINE NUMBER: 800-553-3851

PROVIDES THIRD-PARTY BILLING INFORMATION
AND FACILITATES REIMBURSEMENT

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**FAP
FINANCIAL ASSISTANCE PROGRAM**

HOTLINE NUMBER: 800-447-3437

**THE FINANCIAL ASSISTANCE PROGRAM ASSISTS
PATIENTS HAVING DIFFICULTY PAYING FOR
PROCRT THERAPY**

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FINANCIAL ASSISTANCE PROGRAM (FAP)

USAGE SUMMARY

- 1991: 235 PATIENTS ON FAP
- JANUARY - JULY 1992: ALREADY 301 PATIENTS ON FAP!
- \$1,987,200 FREE PROCRIT PROVIDED THROUGH FAP
- 833 Application have been received since program inception
 - 69% were approved
 - 31% were denied
- Of the 258 denials:
 - 79% due to insurance coverage
 - 21% due to excess income

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FINANCIAL ASSISTANCE PROGRAM

STRATEGY

This program should be positioned differently with each type of customer to fit their needs. The following are benefits to the different customer groups that should be pointed out in your presentations:

- **Physicians/Nurses**
 - Provides free treatment to uninsured patients
 - Enables their patients to receive needed treatment regardless of insurance status
- **Hospital Pharmacists**
 - Patients admitted to hospital can use free PROCRIT from FAP instead of hospital inventory → decreases pharmacy and hospital cost
 - Public hospitals required to provide treatment to patients regardless of insurance status can have these patients enrolled in FAP → decreases pharmacy and hospital cost
- **Home Health Care**
 - Allows them to accept uninsured patients for treatment as added service to their physicians
- **Do not use set income criteria in presentations**

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FINANCIAL ASSISTANCE PROGRAM

PROCEDURES

- 1) FAP reviews application immediately upon receipt.
- 2) If insured, will pass on to PROCRTline to assist with reimbursement opportunities. If uninsured, less than \$30,000 income and little savings/assets, patient is qualified. (Patients are allowed to own a home.)
- 3) FAP will explore publically funded programs that patient may be eligible for (i.e., State AIDS Drug Assistance Plans, EPIC for elderly in NY). If the program requires form enrollment and fees, the patient may decline to enroll. If so, FAP will supply ongoing free PROCRT therapy. If they do enroll, FAP will supply free PROCRT therapy until the other insurance program is in place.
- 4) If uninsured and income is greater than \$30,000, FAP will review the application further. If unusual or insurmountable difficulties are involved, exception may be made and patient may be eligible for free PROCRT.
- 5) Eligible patients will receive 60 days of therapy shipped to the physician.
- 6) Prior to the end of the 60-day period, FAP will contact the office to determine status of the patient (Is the patient still on PROCRT? Has the dose changed?)
- 7) If appropriate, FAP will arrange for another 60 day therapy to be shipped to the physician.
- 8) If patient depletes the 60-day supply prior to FAP calling due to dosign changes, the physician should contact FAP to notify them of the dosing change and request additional drug.
- 9) Patient must be re-qualified every 6 months.
- 0) It is important that you do not present a set income level as one of the criteria for eligibility as this may deter physicians from utilizing the program.

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FINANCIAL ASSISTANCE PROGRAM (FAP)

QUESTIONS & ANSWERS

Q. What are the criteria for eligibility?

A. The only strict criteria is that the patient is uninsured and is non-dialysis. As far as income is concerned, there is no strict criteria. \$30,000 is used as a reference point. If patients earn over \$30,000, he/she is not automatically denied. FAP reviews all the circumstances surrounding the case. If there are unusual or insurmountable difficulties involved, exceptions may be made.

For this reason, you should not quote any income criteria when presenting this program. Stating a figure may seem exclusionary and may deter physicians from utilizing this program.

Q. Most hospitals do not allow patients to bring in drug. How can a FAP patient get PROCRIT when he is in the hospital?

A. If a patient is admitted, the physician can arrange to have a supply of PROCRIT shipped to the hospital for the patient. Thus, the patient does not withdraw drug from the hospital pharmacy inventory, resulting in cost savings for the pharmacy. The same arrangement can be made with home health care agencies. If an HHC is administering the drug and the physician wants it shipped to the HHC, he can note that on the application.

Q. What is the process and how long does it take for a decision on the application?

A. FAP applications are reviewed as soon as it is received. If there is an insurer listed, FAP will get PROCRITline involved to try to obtain reimbursement through the insurer. (Note in the FAP Summary that 74% of the denied cases were due to insurance coverage.) If a patient qualifies and there is no insurance listed, FAP will investigate as to whether there are any publically funded programs available, such as AIDS Drug Assistance Plan (ADAP) in New York, PACE in Pennsylvania, etc. If so, FAP will call the office to inform them and the patient of this availability. If the program requires enrollment fees, the office or patient may decline to apply, in which case FAP will provide free drug for this patient. If the program is free, they are directed to use that program.

The physician receives notification within two weeks of receipt of application. FAP will also notify the appropriate Product Specialist via Voice Mail. Drug is then shipped within a week of decision.

If there is a special need for quicker turn-around, please call Bruce Williams or Jennifer Ng and they can have Pracon expedite the case and have a decision within a week. However, such situations should be exceptions.

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CSP
COST SHARING PROGRAM

HOTLINE NUMBER: 800-441-1366

**THE COST SHARING PROGRAM PROTECTS
PAYERS FROM CATASTROPHIC COSTS**

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**COST SHARING PROGRAM (CSP)
USAGE SUMMARY**

- **32 CLAIMS FOR 1991**
- **1991 DISBURSEMENTS: \$40,664**
 - INSURANCE COMPANY - 34%
 - PATIENT - 31%
 - PHARMACIES - 16%
 - HMO - 6%
 - PHYSICIANS - 6%
 - HOSPITAL - 3%
 - EMPLOYER/SELF INSURED FUND - 3%
- **5 CLAIMS FOR 1992 RECEIVED ALREADY**

* Note: Claims were expected to be low for 1991, the first year of product launch. Programs were not widely known until later in the year resulting in less patients on drug long enough to reach cap. Full utilization in 1992 will not be known until late 1993 since claims can be filed up to 12 months after the year of use.

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COST SHARING PROGRAM

STRATEGY

This program can benefit many different customer groups. When presenting the Cost Sharing Program, be sure to include the following benefits for each group:

- **Physicians/Nurses**
 - Offsets cost to their patients; drug is more affordable --> greater compliance
 - Encourages insurers to reimburse knowing they have a limited liability
 - Physicians eligible for 20% co-pay reimbursement
- **Hospital Pharmacists**
 - Maintaining PROCRIT as the brand allows patient to reach cap --> offsets cost to patient, insurer, and community (taxpayers)
 - Hospitals also eligible for 20% co-pay reimbursement
- **HMOs**
 - Limits their reimbursement liability per patient
- **Retail Pharmacies**
 - Eligible for co-pay reimbursement
 - For patients on limited drug plans, CSP frees up funds for other needed drug therapies
- **Patients**
 - Guaranteed not to pay more than \$8,500 (AWP) per calendar year
 - Eligible for co-pay reimbursement
 - For patients on limited drug plans, CSP frees up funds for other needed drug therapies
- **General Public/Community**
 - Eases burden on public health costs
 - Reimbursement to Medicare/Medicaid and other public insurance programs --> lower cost to taxpayers

COST SHARING PROGRAM (CSP)

ENHANCEMENTS

- REIMBURSEMENT RATE INCREASED FROM NET COST TO DISTRIBUTOR (NCD) + 10% TO AWP
- CALCULATION RATE FOR CAP INCREASED FROM NCD + 10% TO AWP
- CAP REMAINS \$8,500
- PATIENTS REACH CAP EARLIER!

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NDC VALUES

U/ml	PRICE/VIAL	PRICE\PKG	PRICE
2,000	20.00	120.00	480.0
3,000	30.00	180.00	720.0
4,000	40.00	240.00	960.0
10,000	95.00	570.00	2280.0

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AWP VALUES			
U/ml	PRICE/VIAL	PRICE\PKG	PRICE
2,000	24.00	144.00	576.0
3,000	36.00	216.00	864.0
4,000	48.00	288.00	1152.0
10,000	114.00	684.00	2736.0

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	AWP	VIALS	UNITS
10,000	114	74.56	745,600 ■ 746,000
4,000	48	177.08	708,320 ■ 708,000
3,000	36	236.11	708,330 ■ 708,000
2,000	24	354.16	708,320 ■ 708,000

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10000 X3=30,000 746000/30000 =24.8=25WK
9000 X3=27,000 708000/27000 =26.2=26WK
8000 X3=24,000 708000/24000 =29.5=29WK
7000 X3=21,000 708000/21000 =33.7=34WK
6000 X3=18,000 708000/18000 =39.3=39WK
5000 X3=15,000 708000/15000 =47.2=47WK

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COST SHARING PROGRAM

QUESTIONS & ANSWERS

- Q. How does the new AWP-based calculations change the cap and how is this calculated?
- A. The cap will remain the same -- at \$8,500. The cap amount of \$8,500 and reimbursement rate are both based on AWP. Calculations are included in previous pages for your background information only. You should not get involved in calculations with customers. If they have any questions or need help in determining a patient's status regarding the cap, they should call the CSP 800 #. By getting involved with numbers and calculations, you can lose focus of your objective of presenting the benefits of the program and the importance of using PROCRIT only for nondialysis patients.
- Q. What is the best way to have physicians utilize this program?
- A. Leave a supply of brochures for the office and instruct them to hand one out to patients as soon as PROCRIT therapy is initiated. The patient will then know about this program and have an 800 # to contact. If patients call to receive the CSP Folder (containing claim forms, "Notice to Claims Processor" orange sticker, magnet, and rolodex card), they can assist us by informing their insurers about this program. This should encourage insurers to reimburse patients, knowing that their liability is capped, and should also influence them to "prefer" PROCRIT over the other brand.
- Q. How long does it take to pay a claim?
- A. If a claim is received with complete documentation (receipts, billing records, etc.), CSP can pay the claim within 2 weeks. The process is that upon receipt of a claim, they contact all parties involved in a case to confirm quantity used and to ensure that PROCRIT was the brand dispensed.
- Q. When should the patient, physician, or other potential beneficiaries call CSP?
- A. The office should instruct the patient to call as soon as possible, preferably upon initiation of PROCRIT therapy, so that they can receive all the forms up front. This will let them know what is needed to complete the claims form and ensure that they are tracking their usage. The folder also serves as a place to retain all receipts. All potential beneficiaries are encouraged to call as questions arise. However, **claims should not be submitted until after the cap is met.** It is preferable to receive all claims at once at the end of the year. However, CSP will process all claims as they are received. For cash flow purposes, it is understandable that claims may be submitted more frequently.

Q. How can a hospital, pharmacy, physician, or patient benefit from CSP?

A. Insurers often cover only 80% of the cost. The remaining 20% is covered by a secondary insurer, if applicable. Otherwise, the patient, hospital, pharmacy or physician pays the 20%.

The party paying the 20% co-pay is eligible for 20% of the Cost Sharing reimbursement for the amount over the cap.

Example: The expenditures for Patient Anne E. Mia is \$10,500 (based on AWP) in a calendar year. The total eligible reimbursement for Anne is \$2,000. The insurer paid 80% and Dr. Goodheart carried the other 20%. The insurer is due \$1,600, which is 80% of \$2,000. Dr. Goodheart is due \$400, which is 20% of \$2,000.

The Cost Sharing Program Summary (following this section), lists the categories of claimants so far. You can see that the beneficiaries (under "Submitter" column) were 3rd Party Insurers, HMOs, patients, pharmacies, and physicians. The only requirement is that each party eligible for reimbursement must fill out a claim. If both the insurer and patient are eligible for reimbursement, they must both submit a claim. The patient will not automatically receive his 20% just because the insurer submitted a claim.

Q. How can a hospital benefit from this program?

A. A hospital can benefit if they picked up the cost for the co-pay. However, it is generally difficult for a hospital to realize these benefits because they usually can not track a patient's total usage. Unless the patient receives all his PROCRIT from the hospital pharmacy, the only way a hospital would know if a patient reached the cap is if the patient informed the hospital. The hospital would then have to submit a claim to obtain reimbursement. Unfortunately, this is logistically difficult so hospitals have not generally been able to benefit as much as other customer types have. However, if they are able to track usage and submit claims, they are certainly eligible.

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REIMBURSEMENT ASSURANCE

HOTLINE NUMBER: 800-553-3851

**THE REIMBURSEMENT ASSURANCE PROGRAM
ENSURES ACCESS TO PROCRIT THERAPY
FOR QUALIFYING NON-DIALYSIS
PATIENTS DENIED REIMBURSEMENT**

PROGRAM

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**REIMBURSEMENT ASSURANCE PROGRAM
USAGE SUMMARY**

PRIOR TO REIMBURSEMENT ASSURANCE PROGRAM:

- AVERAGE 270 CALLS PER MONTH TO PROCRTLINE
- AVERAGE 180 CASES PER MONTH

SINCE REIMBURSEMENT ASSURANCE PROGRAM (MAY 1):

- AVERAGE 513 CALLS PER MONTH = 90% INCREASE IN CALLS
- AVERAGE 343 CASES PER MONTH = 91% INCREASE IN CASES

AS OF AUGUST 30, 1992:

- 77 SUCCESSES (OF WHICH 38 WERE MEDICARE SUCCESSES)
- 10 DENIALS (OF WHICH 8 WERE MEDICARE)
- 259 PENDING

* Reimbursement Assurance Program Summary Report can be found at the back of this section.

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**REIMBURSEMENT ASSURANCE PROGRAM
STRATEGY**

- **USE WITH ALL PURCHASING PHYSICIAN OFFICES AND HOME HEALTH CARE ORGANIZATIONS:**
 - Customer can start patients based on medical need and not reimbursement status
 - Customer is assured to recoup any losses through replacement product
 - Customer gains comfort in obtaining reimbursement through our assistance
- **USE WITH CUSTOMERS FOR ON-LABEL INDICATIONS:**
 - Customer gains comfort in using PROCRIT through successful experience with reimbursement
 - Customer gains awareness of and experience with Ortho Biotech reimbursement services
- **PROCRIT IS THE ONLY PRODUCT TO PROVIDE SUCH GUARANTEES FOR NON-DIALYSIS USE**

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**REIMBURSEMENT ASSURANCE PROGRAM
PROCEDURES**

- 1) Customer calls for application. Reimbursement Assurance Program representatives offers to send application and informs them of the Medicare process and the potential time requirements. Application is sent with a letter restating Medicare time requirements.
- 2) Reimbursement Assurance Program representatives reviews application immediately upon receipt of written or verbal enrollment.
- 3) PROCRIline assists customer with initial claims and contact insurers if required.
- 4) 45 days after enrollment, program representative calls the customer to determine status of claims.
- 5) If denied, PROCRIline will assist with the appeals process.
- 6) 45 days later, representative contacts customer to determine status of appeals.
- 7) If appeal is denied, customer is instructed to submit proper forms and documentation for replacement drug.
- 8) Upon receipt of required documentation, letter is sent within 7 days notifying the customer that replacement drug will be shipped within 2 weeks.

** will not replace drug until they've
gotten 2nd denial **

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REIMBURSEMENT ASSURANCE PROGRAM

QUESTIONS & ANSWERS

Q. To offer a truly risk-free guarantee program, can we provide free PROCRIT up front or on consignment so that physician offices can start the reimbursement process without having to pay for drug?

A. As you may know, Medicare does not prior approve therapies. Instead, they require that the drug be purchased and the service rendered in order for a claim for reimbursement be filed. We understand that customers would be more willing to start PROCRIT therapy if they were given the drug free up front. However, it would be legally risky for us to do this.

Obtaining free drug and then submitting claims would be asking for reimbursement for something they never paid for. This would be committing insurance fraud. If we provided the free drug and assisted with the claims, we would be accomplices in this illegal activity. Therefore, we will not be offering such a program.

Q. Medicare often takes a long time to decide a case. Physicians end up extending many thousands of dollars before the Reimbursement Assurance Program replace drug. Why can't we replace drug after the first denial for Medicare cases?

A. The reason we do not offer such a service is because approximately 65% of the claims are approved upon appeal. Often, the initial claim denial is due to a clerical error or misunderstanding. Upon appeal, it can be resolved successfully. If we were to replace drug upon first denial without requiring an appeals process, we would be needlessly replacing drug for approximately 65% of cases that would have received approval upon appeal.

IMPORTANT: This program may not be appropriate for all physician. You need to select the appropriate targets to offer this program. Physicians with many PROCRIT candidates would be a good target because if a patient is denied reimbursement and we provide replacement PROCRIT, the physician could use it on another patient who is reimburseable and recoup his/her costs.

Physicians with many candidates may also be receiving reimbursement for other patients which would help the cash flow.

Physicians with only Medicare candidates may not be good targets. Since it may take anywhere from 2 to 5 months for Medicare to complete the required process, some offices may not be able to bear the expense for the time period. Therefore, you need to let them know the potential time requirement up front. If they understand the time and financial outlay required, they can make the decision that is right for their practice.

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Q. Can we reimburse with cash instead of product?

A. If we were to reimburse with cash, this program would be extremely costly to manage and we would not be able to offer this on a widescale. You would be limited to the number of accounts you can offer it to and they would be limited to the number of patients they can enroll. Therefore, the decision was made to reimburse with product.

Q. Can we extend this program to hospitals?

A. This is a very common request. We are exploring this possibility by field testing this program in various institutions. At this time, we do not have all the answers to how this program would be implemented in institutions. As you know, institutional physicians and pharmacists generally do not get involved with reimbursement. They will not know who is reimbursed and who is not. If the physician and/or pharmacist likes the program, they will ask you to speak to reimbursement people. You may then have to track down various Social Workers in all the outpatient clinics and also work the administration office or other billing areas to implement this program. Until we have some more definitive answers, we will only extend it on a pilot basis. If you have a hospital in which you feel you would like to test this program, call Jennifer Ng or Bruce Williams to discuss this possibility.

Q. How can I position this program with Home Health Care Organizations?

A. Certain Home Health Care (HHC) agencies may not find great value in this program initially since many of them have their own professional reimbursement staff. In addition, while they may occasionally accept high reimbursement risk patients as a favor to the physician, they generally do not accept such patients. However, if positioned as a safety net, just in case they are denied reimbursement, they would find value in being assured that they can recoup costs through replacement drug.

Another strategy is to position this program as a service they can in turn extend to physicians. By being assured of replacement product, a Home Health Care agency can now accept a patient without going through a reimbursement check prior. This will result in the patient receiving treatment when needed and not having to wait for an insurer's approval.

Please note that Medicare does not reimburse for PROCRIT administered by home health care agencies. PROCRIT must be procured and administered by the physician.

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ORTHO BIOTECH

VALUE ADDED PROGRAMS/REIMBURSEMENT SUPPORT

RAP	CSP	ProcritLine	FAP
1-800-553-3851	1-800-441-1368	1-800-553-3851	1-800-447-3437
1) All patients receiving PROCrit in Dr.'s office, not hospital, not hospital out-patient clinic. Home Health Care Agencies can participate.	1) All indications can participate.	1) All indications can participate.	1) Indigent patients only not Medicaid patients
2) Medicare patients can enroll.	2) Medicare, Medicaid, insurance patients can participate.	2) Medicare, Medicaid, insurance patients can access.	2) PROCrit can be Fed - Ex d to physicians, hospitals, etc., if needed.
3) After appeals process, doctor will receive replacement product rounded to 6.	3) Offices, hospitals, clinics, patients can participate & enroll.	3) Offices, hospitals, clinics, patients can access.	3) Use as a last resort.
4) All indications can enroll.	4) Usage must exceed 813,000 units in a calendar year. (Jan. to Jan.)	4) Can provide 3rd party billing info. & facilitate reimbursement.	4) Emphasize the need for future business.
5) Call ProcritLine prior to the initiation of therapy to register patients.	5) Drug must be logged with lot number listed. * Give office Red CSP folders. CSP is based on AWP (average wholesale prices).	5) Can help with coding.	
		6) Can't give dialysis reimbursement info.	

Notes:

1/92

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PARTICIPATION

CUSTOMER GROUPS	PROCRIT LINE	FAP	CSP	RAP
PHYSICIAN\NURSE				
HOSPITAL				
HOME HEALTH CARE				
INSURANCE COMPANY				
PHARMACIES				
PATIENT				
HMO				
GEN.PUBLIC/COMMUNITY				
MEDICARE				
MEDICAID				
SELF INSURED EMPLOYEES & UNIONS				

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DISPENSING
PHYSICIANS

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PROCRIT PHYSICIAN SUPPLIERS

PRN ONCOLOGY WHOLESALERS - MICHIGAN
1-800-543-2776

ONCOLOGY SUPPLY- 1-800-633-7555

CHARISE CHARLES -FLORIDA
1-800-942-6999 OR 407-869-7001
FAX: 407-869-5757

FLORIDA INFUSION - 1-800-624-0152

HSR PROFESSIONAL PHARMACY - 203-327-4479
FAX: 203-975-0427

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REIMBURSEMENT ASSURANCE PROGRAM

To help remove reimbursement barriers to PROCRIT therapy, Ortho Biotech has designed the Reimbursement Assurance Program.

ORTHO BIOTECH will provide PROCRIT Therapy **FREE** of charge to any qualifying patient who cannot obtain reimbursement through third-party payers.

This is the only program of its kind for Epoetin alfa therapy. Patients may be enrolled in the Reimbursement Assurance Program until September 1992.

Patient Eligibility

All nondialysis patients receiving PROCRIT therapy dispensed in their physician's office who are unable to obtain reimbursement will benefit from the Reimbursement Assurance Program.

PROCRIT*

PRICE TO PHYSICIANS / RETAIL PHARMACIES AFTER MONEY BACK DIRECT FROM ORTHO.

PROCRIT	YOUR INVOICED COST	ORTHO MONEY BACK PER VIAL	
10,000u/vial	\$92.00	-\$7.60	\$84.40
4,000u/vial	\$38.80	-\$3.20	\$35.60
3,000u/vial	\$29.10	-\$2.40	\$26.70
2,000u/vial	\$19.40	-\$1.60	\$17.70

SORRY! NO SHORT DATED SPECIAL PRICED PRODUCT WITH THIS PROMOTION.

① For rebate requests, send a copy of your Charise Charles Ltd. Inc. Invoice to:
Ortho Biotech Sales Department
Route 202 South
Raritan, New Jersey 08869

ALL Shipments are sent Freight PREPAID!

Charise
CHARLES
1-800-942-5999

* Registered trademark of Ortho Biotech Manufactured by Amgen.

FREE SYRINGES

With EACH VIAL purchased receive a "NO DEAD SPACE" 1/2 or 1 CC syringe



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MEDICARE REIMBURSEMENT
STATE OF FLORIDA

<u>Product/Size</u>	<u>Code</u>	<u>Medicare Allowance</u>	<u>Medicare Pays 80%</u>	<u>Physician Cost</u>	<u>Rebate =</u>	<u>Net Cost</u>	<u>Clear</u>
Procrit 2000u	Q99**	\$ 24.00	\$19.20	\$20.00	\$1.60	\$18.40	\$.80
Procrit 3000u	Q99**	\$ 36.00	\$28.80	\$30.00	\$2.40	\$27.60	\$1.20
Procrit 4000u	Q99**	\$ 48.00	\$38.40	\$40.00	\$3.20	\$36.20	\$2.20
Procrit 10000u	Q99**	\$120.00	\$96.00	\$95.00	\$7.60	\$87.40	\$8.60

Injection	90782	\$ 3.22	\$ 2.58
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SAVINGS WITH PROCRIT*ONLY FROM ORTHO BIOTECH

<u>STRENGTH</u>	<u>REG. COST</u>	<u>LESS 8%</u>	<u>LESS 3%*</u>	<u>FINAL COST</u>	<u>EPOGEN</u>
2,000	\$20.00	\$18.40	\$.70	\$17.70	\$20.00
3,000	\$30.00	\$27.60	\$.90	\$26.70	\$30.00
4,000	\$40.00	\$36.80	\$1.20	\$35.60	\$40.00
10,000	\$95.00** (5% less than other brand)	\$87.40	\$3.00	\$84.40	\$100.00

* Save an additional 3% when purchasing from oncology suppliers

**Save a total of 16% on Procrit* 10,000 vs. Epogen* 10,000

VALUE ADDED SERVICES:

RAP (Reimbursement Assurance Program) CSP (Cost Sharing Program)
 FAP (Financial Assistance Program) PROCRITLINE (Reimbursement Assistance)

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GUIDELINES FOR THE USE OF ERYTHROPOIETIN (PROCRIT™, Ortho Biotech) IN AIDS PATIENTS

Indication: AZT Induced Anemia

Patient Characteristics

- the patient and physician should be committed to an aggressive course of therapy
- patients should have a sustained symptomatic anemia with repeated HCT determinations of $\leq 30\%$ and/or a significant transfusion requirement necessary to maintain a satisfactory HCT
- patients must have a documented native serum erythropoietin level of ≤ 500 mU/ml
- patients must be receiving ≤ 4200 mg/week of AZT
- it is highly recommended that a bone marrow examination be performed before initiating erythropoietin and that disease affecting the bone marrow be addressed (opportunistic infections and neoplasms)

Dosing, Administration, and Response

- initial dose: 100 U/kg SC or IV three times weekly (TIW) for at least 8 weeks
- HCT determinations should be performed at 4 and 8 weeks
- if response is not satisfactory (in terms of decreasing transfusion requirement or increasing HCT) then the dose can be increased in increments of 50-100 U/kg TIW up to a maximum of 300 U/kg TIW
- maintenance: dose should be titrated up or down to maintain desired HCT taking into account AZT adjustments and intercurrent infections
- erythropoietin should be discontinued if the HCT goes above 40% and restarted at a 25-50% dose reduction when the HCT falls below 36%

Cost and Reimbursement

- average cost per patient-year = \$12,000 to \$13,000
- compare to annual transfusion costs (15 units) = \$5800 - \$8400
- financial assistance offered by the manufacturer (Ortho Biotech):
 1. Financial Assistance Program: free drug will be provided to all patients meeting criteria
 - a. patient must meet medical criteria
 - b. patient must lack third party reimbursement and/or financial resources
 - c. HotLine 1-800-447-3437
 2. Ortho Biotech will provide free drug in all cases after an annual cost of \$8500 has been incurred
 3. Ortho Biotech is presently paying for all serum erythropoietin levels at PCMH

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\$ \$ \$ \$ \$ \$

PROCRIT REBATE MONEY

2,000 u		3,000 u	
1	six pack = 9.60	1	six pack = 14.40
2	six packs= 19.20	2	six packs= 28.80
3	six packs= 28.80	3	six packs= 43.20
4	six packs= 38.40	4	six packs= 57.20
5	six packs= 48.00	5	six packs= 72.00
4,000 u		10,000 u	
1	six pack = 19.20	1	six pack = 45.60
2	six packs= 38.40	2	six packs= 91.20
3	six packs= 57.60	3	six packs=136.80
4	six packs= 76.80	4	six packs=182.40
5	six packs= 96.00	5	six packs=225.00

Amount of refund with Epogen = \$ 0.00 (No Rebate Program)

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Charise
CHARLES
Ltd., Inc.

Charise
CHARLES
Ltd., Inc.

The Charise Charles GREAT REBATE
A Successful program that just got better!

The GREAT REBATE program pays you to buy certain widely used and competitively priced products from us. Our rebate is based on the quantity of these products that you purchase and not the invoice price. We do not reduce the amount of your rebate when you participate in one of our many special price promotions. Enrollment in the GREAT REBATE program begins upon your approval of the paperwork and the receipt of this form by Charise Charles Ltd. Inc. The program lasts twelve months from the date you enroll and rebates will be issued at the end of this period. Accounts must be in good standing (not delinquent) in order to receive a rebate from Charise Charles Ltd., Inc. Everyone participating in the program will periodically receive a computer printout of the total rebate dollars earned up to that point in the program. We have designed the GREAT REBATE to be of benefit to both individual accounts and group accounts under common management or ownership.

Here is an example of how the program can work for you:

IN A 12 MONTH PERIOD YOU PURCHASE:

YOUR REBATE WOULD BE:

624 vials Procrit® 2,000u \$ 100.00
540 vials Procrit® 3,000u 150.00
510 vials Neupogen® 1ml 100.00
260 vials Neupogen® 1.6ml 75.00
YOUR TOTAL GREAT REBATE AMOUNT **\$ 425.00**

NUMBER OF VIALS PURCHASED IN A 12 MONTH PERIOD	PROCRIT 2,000u REBATE AMOUNT	PROCRIT 3,000u REBATE AMOUNT	PROCRIT 4,000u REBATE AMOUNT	PROCRIT 10,000u REBATE AMOUNT	NEUPOGEN 1ml REBATE AMOUNT	NEUPOGEN 1.6ml REBATE AMOUNT
500 - 749	100.00	150.00	200.00	500.00	100.00	150.00
750 - 999	200.00	300.00	400.00	1000.00	200.00	300.00
1000 - 1249	305.00	457.50	610.00	1525.00	305.00	457.50
1250 - 1499	410.00	615.00	820.00	2050.00	410.00	615.00
1500 - 1749	520.00	780.00	1040.00	2600.00	520.00	780.00
1750 - 1999	630.00	945.00	1260.00	3150.00	630.00	945.00
2000 - 2249	745.00	1117.50	1490.00	3725.00	745.00	1117.50
2250 - 2499	860.00	1290.00	1720.00	4300.00	860.00	1290.00
2500 - 2749	980.00	1470.00	1960.00	4900.00	980.00	1470.00
2750 - 2999						
3000 - 3249						
3250 - 3499						
3500 - 3749						
3750 - 3999						
4000 - 4249						
4250 - 4499						
4500 - 4749						
4750 - 4999						

Please contact your Charise Charles customer service representative for information regarding rebate amounts on purchases of 5000 vials or more.

Procrit® (a registered trademark of Ortho-Biotect manufactured by Amgen)
Neupogen® (G-CSF) is a registered trademark of Amgen.

Approved by: _____ Date: _____ Account Name: _____
Printed Name: _____ Address: _____
Title: _____ City & State: _____

Retain original and return a copy to Charise Charles Ltd., Inc.

285 West Central Parkway Suite 1704 Altamonte Springs, Florida 32714-2554
407-869-7001 1-800-942-5999 FAX 407-869-8757

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RETAIL

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III. RETAIL PHARMACY ACTION PLAN

- A. Use DDD to target key retail pharmacies
- B. Target pharmacies that purchased PROCRIT previously.
- C. Target pharmacies that committed to convert to PROCRIT
- D. Target Epogen non dialysis pharmacies
- E. Maximize coverage of key retail pharmacies.
 - 2 x's - 10 weeks
 - 1.5 Rx call average
- F. Know the Medicaid Reimbursement Rate

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RETAIL WORKSHOP

A. CALL ACTIVITIES

B. TARGETING ACTIVITIES

- Market Research/from
Physicians & Staff

- Epogen List/Wholesale

- Prospecting

Yellow Pages

- Goldline List

- DDD

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C. MEDICAID REIMBURSEMENT

- Reimbursement Exercise

- Reimbursement Rate in your
Territory

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PHARMACY WORKSHEET

AWP PRICES	Per Vial		Per Six
			Pack
	2,000 u	= 24.00	144.00
	3,000 u	= 36.00	216.00
	4,000 u	= 48.00	288.00
	10,000 u	=114.00	684.00

Enter the MEDICAID reimbursement for your State:

State _____ Amount _____

Scenario: Don at Midtown Pharmacy is stocking Epogen for HIV patients. He is convinced that he doesn't make any money by stocking the product for anyone except private insurance patients. He is currently stocking two (2) packs of the 10,000 u.

How can you convince Don to stock PROCRIT for his MEDICAID patients?

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TENNESSEE MEDICAID

PRIOR APPROVAL-----NO
INDICATIONS COVERED-----ALL DIAGNOSES
REIMBURSEMENT SCHEDULE----AWP LESS 8%
FEE TO PHARMACY-----\$3.91

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SOUTH CAROLINA MEDICAID

PRIOR APPROVAL-----Pharmacy services requires special prior authorization--not to limit use--but to see if home administration is appropriate.

INDICATIONS COVERED-----Patient brings letter from MD to pharmacy, or MD phones in. Will not pay for administration, but will pay for office visit.
ALL INDICATIONS COVERED.

REIMBURSEMENT SCHEDULE----AWP LESS 9.5%

FEE TO PHARMACY-----\$4.05

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NORTH CAROLINA MEDICAID

PRIOR APPROVAL-----NO

INDICATIONS COVERED-----ALL DIANOSSES

*****ONLY 6 RX'S PER MONTH*****

REIMBURSEMENT SCHEDULE----AWP LESS 10%

FEE TO PHARMACY-----\$5.60

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GEORGIA MEDICAID

PRIOR APPROVAL-----YES

INDICATIONS COVERED-----ONLY APPROVED INDICATIONS

REIMBURSEMENT SCHEDULE----AWP LESS 10%

FEE TO PHARMACY-----\$4.41

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MISSISSIPPI MEDICAID

PRIOR APPROVAL-----YES

INDICATIONS COVERED-----FDA INDICATIONS ONLY, BUT WORTH TRY.

REIMBURSEMENT SCHEDULE----AWP LESS 10%

FEE TO PHARMACY-----\$5.16

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FLORIDA MEDICAID

PRIOR APPROVAL-----NO

INDICATIONS COVERED-----ALL DIAGNOSES

REIMBURSEMENT SCHEDULE----WHOLESALE ACQUISITION COST PLUS 7%

FEE TO PHARMACY-----\$4.23

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ALABAMA MEDICAID

PRIOR APPROVAL-----NO
INDICATIONS COVERED-----ALL DIAGNOSES
REIMBURSEMENT SCHEDULE----NOT AVAILABLE
FEE TO PHARMACY-----NOT AVAILABLE

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D. RETAIL BINDER

- Order Entry Numbers

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RETAIL PHARMACY

NAME _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

STORE HOURS _____

PHARMACISTS _____

BUYER _____

WHOLESALEERS _____

SPECIAL ORDER INFORMATION _____

CALL DATA

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\$ \$ \$ \$ \$ \$

PROCRIT REBATE MONEY

2,000 u		3,000 u	
1	six pack = 9.60	1	six pack = 14.40
2	six packs= 19.20	2	six packs= 28.80
3	six packs= 28.80	3	six packs= 43.20
4	six packs= 38.40	4	six packs= 57.20
5	six packs= 48.00	5	six packs= 72.00
4,000 u		10,000 u	
1	six pack = 19.20	1	six pack = 45.60
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3	six packs= 57.60	3	six packs=136.80
4	six packs= 76.80	4	six packs=182.40
5	six packs= 96.00	5	six packs=225.00

Amount of refund with Epogen = \$ 0.00 (No Rebate Program)

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E. BENEFITS OF PROCRIT

- Sell Benefit of 6's vs. 10's
- Profitability of 8% Retail Rebate
- Sell Reduced Pricing on Procrit 10,000

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F. SUPPORT MATERIALS

- Cost Sharing

- Procritline

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G. DEFINITIONS

- NCD

- AWP

- Upcharge

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H. ROLE PLAY

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I. COMMON OBJECTIONS

- Substitution laws

- Reimbursement Processing

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WHOLESALE

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V. WHOLESALER ACTION PLAN

- A. Meet with distributors as soon as possible to discuss the new PROCRIT Retail Rebate Program.**
- B. Review the PROCRIT Performance Rebate**
- C. Distributors should target and convert Epogen non-dialysis pharmacies.**
- D. Obtain the Epogen non-dialysis pharmacy list to use for targeting purposes.**

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WHOLESALE WORKSHOP

A. CLASS OF TRADE

- Definitions

11.

12.

16.

21.

26.

44.

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B. KEY PERSONNEL

- HOUSE MANAGER

- SALES MANAGER

* Sales Meetings

* Promotions

- INVENTORY CONTROL MANAGER

* Inventory levels

* Epogen Lists

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B. KEY PERSONNEL Con't.

- BIDS AND CONTRACTS MANAGER

- INSTITUTIONAL ACCOUNTS
MANAGER

* Promotion

- WAREHOUSE MANAGER

* Dating

* Rotating of Merchandise

- TELEPHONE PERSONNEL

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C. RETURN GOODS MANAGEMENT

- POLICY

- AUTHORIZATION

- PRODUCT SPECIALIST
CONTROLS RETURNS

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ORTHO BIOTECH RETURNED GOODS POLICY

ORTHO BIOTECH returned goods policy is consistent with our business practice to provide quality products to our customers. Product that does not meet quality requirements may be returned for credit or product replacement. Retail drug stores and institutional pharmacies should return goods to the wholesale distributor from which the product was purchased. Products should not be returned directly to ORTHO BIOTECH unless they were purchased directly from ORTHO BIOTECH.

Because ORTHO BIOTECH products are biotechnology derived products and subject to regulations applied to Biologic Materials, product returned to ORTHO BIOTECH must be destroyed. To avoid waste of these valuable therapeutics, please review the conditions under which returns to ORTHO BIOTECH will be authorized for credit or replacement. Also read the easy procedure for shipping a return. Your ORTHO BIOTECH Product Specialist will assist you if you have any questions about how to obtain authorization for a return.

AUTHORIZED RETURNS

ORTHO BIOTECH accepts full responsibility for shipping orders to our customers in the correct quantities and in good saleable condition. If an ORTHO BIOTECH customer notifies us that we have not carried out this responsibility, we will authorize return of the affected product, and promptly issue replacement product or credit. Authorized returns include:

- Product damaged in shipment
- Product lost in shipment and delivered after shipping conditions have exceeded the limits set by ORTHO BIOTECH.
- Product that exceeds the expiration date specified on the product labeling. Product is usable through the end of the month indicated in the expiration date, EXAMPLE- Product marked 11/91 is usable until 11/31/91.
- Product (Orthoclone OKT*3 only) that is within expiration date by one year. EXAMPLE - Product marked expiration 1/91 is returnable up and until 1/31/92.
- Product that have been discontinued.
- Shipping errors caused by ORTHO BIOTECH or our assigned carrier.
- Product returned to ORTHO BIOTECH for quality assurance testing as a result of a product inquiry or complaint filed with ORTHO BIOTECH Medical Services and Support Department.
- Product recalled or otherwise removed from inventory by ORTHO BIOTECH.
- Product that our carrier cannot deliver.
- Overstocking resulting from ORTHO BIOTECH promotion of sales representative error.

D. PROMOTIONAL PROGRAM
(4th Qtr)

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E. ROLE PLAY

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F. COMMON OBJECTIONS

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QUESTION & ANSWERS
ANSWER

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FOLLOW-UP
TRAINING

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FOLLOW-UP TRAINING PROGRAM

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THE PLAN

ENVIRONMENT

STRATEGY

SYSTEMS

IMPLEMENTATION

RESULTS

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SOUTHERN REGION

STANDARDIZED FIELD TRAINING

ENVIRONMENT

At this meeting we discussed the current environment in the Southern Region, developed our strategy, developed our systems, discussed implementation and outlined desired results. Outlined below is a current environment in the Southern Region:

- ♦ Complex Technical Information
- ♦ Low Tenure Product Specialist
- ♦ Diversified Customer Base (doctors, pharmacies, home health care, hospitals, wholesalers, physician supply)
- ♦ Variety of Sales and Marketing Programs
 - M.A.P.P.
 - Reimbursement Programs
 - Distribution Programs
 - Managed Health Care Programs
- ♦ Uncertain Territories due to Territory Realignment
- ♦ No Standardized Field Training in the Southern Region
- ♦ Too Many Priorities
- ♦ Heavy Work Load

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- ◆ Questionable Support System for New Hires
- ◆ Confusion Over Ortho Biotech Culture/Environment
- ◆ Pressure to Make Your Numbers
- ◆ Regional Training Specialists are not Integrated into Field Training Process
- ◆ Pending New Product Launch
- ◆ No Mentors
- ◆ Product Knowledge Received without Adequate Direction

STRATEGY

The following strategy was developed:

Accelerate training of Product Specialist in the Southern Region to accelerate impact of PROCRIT® sales and provide a supportive environment for learning and development.

SYSTEMS

The following systems were outlined to ensure standardization and implementation:

- A standardized Initial Training and Follow-up Training Program was outlined.
- A flexible follow-up training program was designed with key objectives in key areas.
- Correspondence/follow-up standards were established
 - Follow-up correspondence will be sent to Product Specialists, Division Manager, and Regional Manager.
 - Feedback will be given to Regional Training Specialists for development.
 - Feedback will be given to the training department.
- Regional Training Specialists and Division Managers will monitor the training program.

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IMPLEMENTATION

Listed below are the implementation steps to standardize training within the Southern Region:

- A standardized training program will be presented to Southern Region Division Managers and Field Sales Manager.
- A two day Regional Training Session will be conducted in the 4th Quarter of 1992.
- Follow-up training will be initiated in the 4th Quarter of 1992.
- Pre-initial training will be implemented now.

RESULTS

The desired results for this program are listed below:

- Standardized training within the Southern Region.
- Better support systems for new Product Specialists.
- Accelerated learning and development.
- Accelerated utilization and development of Regional Training Specialists.
- Improve PROCRIT sales.

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**SOUTHERN REGION
PROPOSED INITIAL TRAINING SCHEDULE**

WEEK 1

- DAY: 01 - DM Orientation
- DAY: 02 - Home Study - Training Orientation
- DAY: 03 - Home Study - CRF
- DAY: 04 - Home Study - CRF/Review CRF Package Insert
- DAY: 05 - Home Study - Hematology

WEEK 2

- DAY: 01 - CRF Assessment & Review (Trainer's Territory)
- DAY: 02 - Field Day (Trainer's Territory) Focus on Retail/Nephrology
- DAY: 03 - Home Study - HIV
- DAY: 04 - Home Study - HIV
- DAY: 05 - Home Study - HIV

WEEK 3

- DAY: 01 - HIV Assessment & Review Direction (Trainer's Territory)
- DAY: 02 - Field Day (Trainer's Territory) Focus on HHCA/HIV Physicians
- DAY: 03 - Home Study - Oncology
- DAY: 04 - Home Study - Oncology
- DAY: 05 - Home Study - Oncology

WEEK 4

- DAY: 01 - Home Study - Oncology
- DAY: 02 - Home Study - Managed Health Care/Reimbursement/Marketing Info
- DAY: 03 - Home Study - General Review
- DAY: 04 - Overall Review with Trainer in Trainer's Territory
- DAY: 05 - Oncology Assessment & Review with Trainer/Personal

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SOUTHERN REGION
PROPOSED INITIAL TRAINING SCHEDULE

WEEK 5

DAY: 01 - Initial School - Part I - Raritan, NJ
DAY: 02 - Initial School - Part I - Raritan, NJ
DAY: 03 - Initial School - Part I - Raritan, NJ
DAY: 04 - Initial School - Part I - Raritan, NJ
DAY: 05 - Initial School - Part I - Raritan, NJ

WEEK 6

DAY: 01 - Initial School - Part I - Raritan, NJ
DAY: 02 - Initial School - Part I - Raritan, NJ
DAY: 03 - Initial School - Part I - Raritan, NJ
DAY: 04 - Initial School - Part I - Raritan, NJ
DAY: 05 - Initial School - Part I - Raritan, NJ

WEEK 7

DAY: 01 - Organization/Administration/Personal
DAY: 02 - Home Study - Leustatin Portfolio
DAY: 03 - Home Study - Leustatin Portfolio
DAY: 04 - Home Study - Leustatin Portfolio
DAY: 05 - Home Study - Review Trade Programs, Managed Health Care, Reimbursement Programs, Value Added Program

WEEK 8

DAY: 01 - Assessment & Review of Leustatin, Review Sales & Marketing Programs, Skill Building, Role Playing (Trainer's Territory)
DAY: 02 - Field Day in RTS Territory (Trainer make calls on Hospital/Retail)
DAY: 03 - Field Day in RTS Territory (Trainer make calls on Hem/Onc, HIV, Hospital)
DAY: 04 - Home Study - Review
DAY: 05 - Home Study - Review

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**SOUTHERN REGION
PROPOSED INITIAL TRAINING SCHEDULE**

WEEK 9

DAY: 01 - Initial School - Part II - Raritan, NJ
DAY: 02 - Initial School - Part II - Raritan, NJ
DAY: 03 - Initial School - Part II - Raritan, NJ
DAY: 04 - Initial School - Part II - Raritan, NJ
DAY: 05 - Initial School - Part II - Raritan, NJ

WEEK 10

DAY: 01 - Initial School - Part II - Raritan, NJ
DAY: 02 - Initial School - Part II - Raritan, NJ
DAY: 03 - Initial School - Part II - Raritan, NJ
DAY: 04 - Initial School - Part II - Raritan, NJ
DAY: 05 - Initial School - Part II - Raritan, NJ

WEEK 11

DAY: 01 - Organization/Administration/Personal
DAY: 02 - Admin. Day (Trainer in Trainee Home) Files, Route List, Top 40
DAY: 03 - Field Day in Trainee's Territory (Hosp., HHCA, Dr. CRF, HIV, H/O)
DAY: 04 - Field Day in Trainee's Territory (Wholesaler, Physician Supply)
DAY: 05 - Field Day in Trainee's Territory (Retail) Reimbursement Programs,
Value Added Program

WEEK 12

DAY: 01 - Administration/Schedule Appointments
DAY: 02 - Field Day - Alone
DAY: 03 - Field Day - Alone
DAY: 04 - Field Day - Alone
DAY: 05 - Field Day - Alone

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SOUTHERN REGION
PROPOSED INITIAL TRAINING SCHEDULE

WEEK 13

DAY: 01	-	Field Day with Division Manager
DAY: 02	-	Field Day with Division Manager
DAY: 03	-	DM Sets up Follow Up Program with RTS & Product Specialist input
DAY: 04	-	
DAY: 05	-	

WEEK 14

DAY: 01	-
DAY: 02	-
DAY: 03	-
DAY: 04	-
DAY: 05	-

WEEK 15

DAY: 01	-
DAY: 02	-
DAY: 03	-
DAY: 04	-
DAY: 05	-

WEEK 16

DAY: 01	-
DAY: 02	-
DAY: 03	-
DAY: 04	-
DAY: 05	-

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FOLLOW UP TRAINING

**PHYSICIAN EFFECTIVENESS
HOSPITAL EFFECTIVENESS
RETAIL EFFECTIVENESS
HHCA EFFECTIVENESS
DISTRIBUTOR EFFECTIVENESS
ADMINISTRATION
TERRITORY ANALYSIS
SPEAKERS/GRANTS
OASIS ORIENTATION
ACE/MANAGING DIVERSITY
CLERKSHIPS**

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PHYSICIAN TRAINING OBJECTIVES

- A) Call Activity/Coverage
 - Requirements for RN call activity
 - Top 40 Physicians
 - Who?
 - How to track?
 - Classification
 - Call goal discussion
- B) Physician Strategies
 - Dispensing Physician Strategies
 - Non-Dispensing Physician Strategies
 - The Oncology Call - What can we say?
 - Conversion vs. Expansion Strategies
- C) Personnel - The complete call
- D) Reimbursement issues/Programs
 - Background information (3rd Party Medicaid, Medicare)
 - Understanding and implementation of Cost Sharing Program, Reimbursement Assurance Program, Financial Assistance Program, ProcritLine
 - How does Medicaid and Medicare work?
 - HRSA/HIV Medication program
- E) Special Programs
 - Patient Trial Program
 - Physician Rebate - 8%
 - EPO Testing
 - MSS
 - Grants/Speakers
 - Service items - (pens, pads, starter kits, sharps containers)

F) Presentations

- Total call concept
- MAPP/EST
- In-Services
 - a) Discuss expense norms
 - b) Is this a good business decision to conduct an in-service?
 - c) Business objectives
 - rapport
 - reaching inaccessible physicians
 - d) Presentation types
 - HIV
 - CRF
 - EPO - Overview
 - Reimbursement Programs
 - Amgen/Ortho Biotech relationship
 - e) Customers
 - Reached through in-services
 - physicians
 - nurses
 - hospital personnel
 - home health care agencies
 - support groups
 - ancillary groups
 - f) Presentation skills
 - Platform skills
 - Pre-Planning
 - Equipment needed
 - Objection handling
 - Consensus closing
 - Length of presentation
- Handling objections
- Closing - Discuss closing strategies for both, the dispensing and non-dispensing physician.

G) Market Research Information

- Pharmacies utilized?
- Home Health Care Agency utilized?
- HMO affiliation?
- Infusion Center affiliation?
- Hospital affiliation?
- Protocol for treating anemia
- Use of Erythropoietin
- Use of PROCRIT
- Physician Supplier utilized

HOSPITAL TRAINING OBJECTIVES

Knowledge of the following areas:

A) Personnel

- National Account Manager
- Key Account Specialist
- Regional Training Specialist
- Division Manager

B) Protocols/Procedures

C) Validate Profile Information - This should include the following:

- Purchasing Director
- GPO affiliation
- Prime vendor contract
- Secondary vendor
- Non-dialysis vs. dialysis business and potential
- Total dollar potential
- Materials management personnel
- Amgen contract terms
- Other pertinent information that would be vital in converting this account.

D) Total Call Concept - The people to be seen would be:

- Director of pharmacy
- Assistant director of pharmacy
- Clinical pharmacist
- Social worker and case manager
- Blood bank
- Labs
- People doing serum EPO tests
- Education/training department
- Drug information
- Finance department
- P&T members
- Buyer
- Administration personnel
- Out-patient pharmacy manager
- Home health care manager
- Grant and speaker key personnel.

- E) Top 5 Hospitals
 - Parameters for inclusion
 - Objectives
- F) Call Activity/Coverage
 - Standards and goals
- G) Presentations
 - Value Plan
 - T-Bar
 - In-services
 - Value Added Programs
 - Early Purchase Programs
 - EPO Test
- H) Call Preparation
 - Scheduling
 - GPO Contract
 - T-Bar Information
 - Fact Finding
 - If not converted, why?
- I) Post Conversion Follow-up
 - Wholesaler
 - Prime Vendor
 - Information loaded with wholesaler
 - Buyer/Tech
- J) Use of Grants
 - Targeted Accounts
- K) Integration with National Accounts Managers and Key Account Specialists
- L) DDD Utilization
- M) Military Accounts

DISTRIBUTOR TRAINING OBJECTIVES

- A) Does Product Specialist have any distributors in their territory?
- B) Classes of Trade 11, 12, 16, 21, 26, 44
 - Definition
 - Pricing policies
- C) Invoice processing
- D) Sales Estimate
 - SWAG
 - Average daily sales
 - Percentage contribution *
 - Product Specialist/Division Manager
 - Factors (Special promotions, etc.)
 - Cut-Off Dates
 - Per Quarter (4, 4, 5 = 13 weeks)
 - Universal Calendars
- E) Customer Service
 - 1-800
 - Fax Number
- F) Return Goods Management
 - Authorization
 - Product Specialist controls returns
 - Policy
- G) Inventory Management
 - Adequate stock
 - Dating policy
- H) Trade Programs
 - Explain trade programs
 - Implementation
- I) Key Personnel
 - House Manager
 - Sales Manager
 - Inventory Control Manager
 - Bids and Contracts Manager
 - Managed Health Care Manager
 - Sales personnel

- Morgue Manager
 - Telephone personnel
- (Issues = QBSR, Programs, Pricing Flexibility, Up-charge, etc.)

J) Call Activity

K) Tour distributor

HOME HEALTH CARE AGENCIES TRAINING OBJECTIVES

Knowledge of the following areas:

A) Personnel

- Registered Pharmacist
- Buyer
- HIV Oncology Program Coordinator
- Reimbursement Personnel
- Marketing Personnel
- Manager/Director

B) How to find home health care agencies

- Doctor's office
- Yellow pages
- Registered pharmacist
- Social workers
- Wholesalers
- Nurses
- DDD
- HIV/Oncology support groups
- Managed health care list

C) Sourcing

- GPO affiliation
- Contract, Amgen or Ortho?
- Prime vendor
- Distributor
- Affiliates

D) Pricing

- Product Specialist can offer 3%
- When is a contract appropriate?
- No other rebates (no retail/no physician rebate programs)
- Early Purchase Program
- Distributor Pricing Flexibility

E) In-services

- Value Added Programs
- Service Items
- Market Research
- Partnering

F) Call Activity and Coverage

- Proper classification (example given, Classes A, B, C)
- Coverage depends on classification

G) Definition

- Home health care agencies
- Infusion center

H) Procedures

- Developing/Implementing Contracts

RETAIL TRAINING OBJECTIVES

- A) Call Activities
 - Standards - 2.0 calls per day
 - Establish realistic call objectives
- B) Targeting Accounts
 - Market Research/from physicians and staff
 - Rebate List
 - Goldline List
 - Epogen List/wholesale
 - Prospecting
 - Telephone
 - Yellow Pages
- C) Identify Top Retail Zips on DDD
- D) Understand Medicaid Reimbursement
- E) Know How to Process an Order
- F) Obtain Order Entry Numbers from distributors
- G) Develop a Retail Binder with appropriate sales materials & product information
- H) Know how to explain PROCRIT Profit to the Pharmacist
- I) Conduct Market Research
- J) Know how to overcome common objections
 - Substitution Laws
 - General Issues
 - Medicaid
 - Medicare
 - Reimbursement Processing
 - Packaging 6 vs. 10
- K) Definitions
 - NCD
 - AWP
 - Upcharge

L) Standards of Retail Call

- What constitutes a call
- What constitutes a retail conversion

TERRITORY ANALYSIS

- A) Resources
 - DDD
 - Territory Records
 - Goldline Information
 - Physician Rebates
 - Wholesalers
 - Invoices
 - Descending Dollars Report
 - Managed Healthcare Charge-back Information
- B) Target Customers
 - Identify top zip codes
 - Key accounts/outlet report
 - Evaluate trends/amounts
- C) Analyze Market Segments and Develop a Plan of Action
- D) Analyze Incentive Compensation Criteria and Develop Plan of Action

SPEAKER/GRANTS

A) Speaker and Grant

- Targeted Use
- Institutions
- Hospitals
- Support Groups

B) How to request Speakers and Grants

- Grants
 - Divisional Manager
 - Jennifer Ng
 - Regional Managers
- Speakers
 - Divisional Manager
 - Toltis

C) Speakers

- Input on subject matter
- Develop local speakers
- Physicians
- Pharmacists
- Nurses

D) Impact of Speaker Programs

- Market Expansion
- Relationships
- Inaccessible Physicians

E) Coordinate

- With other Product Specialists
- More than 1 location

F) Protocols

G) Return on Investment

H) Grants

- Division grant budget
- Market Share Grant Enhancement Program
- Managed Healthcare Grants
- Public relations grants

ADMINISTRATION TRAINING OBJECTIVES

Knowledge of the following areas:

- A) Set-up files/system
 - File retention/processing
- B) Expense Reporting
 - Norms
 - Standards
 - Due Dates
 - Receipts
 - Procedures
- C) Weekly Activity Reporting
 - Manual
 - Transmission on OASIS
 - Calls/Comments on the weekly activity report
 - Pertinent information on the weekly activity report
- D) Routing
 - Monthly
 - Daily
- E) Grant Requests
 - Targeting Accounts
 - Procedures
- F) Speaker Requests
 - Targeting Accounts
 - Procedures
- G) Who do I call when I need ... ? (e.g., supplies, grants, car problems)
- H) Sales Supplies
 - How to order
- I) Company Protocol
- J) Review Reports
 - Invoices
 - Customer Reports
 - Etc.

MISCELLANEOUS

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FOLLOW UP TRAINING

**PHYSICIAN EFFECTIVENESS
HOSPITAL EFFECTIVENESS
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HHCA EFFECTIVENESS
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TERRITORY ANALYSIS
SPEAKERS/GRANTS
OASIS ORIENTATION
AGE/MANAGING DIVERSITY
CLERKSHIPS**

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PROCRIT® REIMBURSEMENT PROGRAMS

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REIMBURSEMENT PROGRAMS

GENERAL RULES OF THUMB



Determine if reimbursement is an issue before presenting programs.



Determine which programs are appropriate for the customer and present benefits for those programs only.



Don't get involved in details such as coding and filing claims. Present overview of program and inform them of how to use to program. Have customer use PROCRIline for administrative details.
(Hint: If customers are calling you with problems filling out claims, you are spending too much time on the details. Refer them to PROCRIline.)



Don't rely solely on reimbursement programs. Remember clinical support and other value added services.



Connect reimbursement programs with PROCRI. "PROCRI is the only Epoetin alfa that provides these programs."



Sell PROCRI, not reimbursement programs.

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PROCRITLINE

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DATE OF CALL	CALLER	CITY	STATE	SALES REPRESENTATIVE	TERMINAL	DIAGNOSIS	MEMBER	ORIGINAL STATUS	CURRENT STATUS	DAYS	DATE OF RESOLUTION
05/12/92	DAE OF MICHIGAN	LITTLE ROCK	AR	CLINTON, BOY	00007	CHRONIC RENAL FAILURE	MEDICAD	ORTO CLM	SUCCESS	0	05/12/92
06/07/92	WALSH, Peter	ANCHORAGE	AK	MARK, PAUL	53223	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	5	06/13/92
03/16/92	Woods, Thomas	ANCHORAGE	AK	MARK, PAUL	53223	CHRONIC RENAL FAILURE	CONNECTICUT GENERAL LIFE	ORTO CLM	SUCCESS	2	03/20/92
06/17/92	DLD, Christopher	BIRMINGHAM	AL	RUCKER, Y. ALAN	52023	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	0	06/17/92
05/13/92	Tallding, Allen	BIRMINGHAM	AL	RUCKER, Y. ALAN	52023	BREAST CANCER	ALABAMA HEALTH NETWORK	P/A	SUCCESS	0	05/13/92
08/24/92	Thomas, Richard	BIRMINGHAM	AL	RUCKER, Y. ALAN	52023	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	1	08/25/92
05/05/92	Tallding, Allen	BIRMINGHAM	AL	RUCKER, Y. ALAN	52023	AMENIA	MEDICARE	ORTO CLM	SUCCESS	0	05/05/92
03/03/92	Thorp, David	BIRMINGHAM	AL	WANT, LYNN	52050	CHRONIC RENAL FAILURE	MEDICARE	DEN-APPL	SUCCESS	6	03/09/92
05/29/92	Boorah, E. Bao	BREDFIELD	AL	WANT, LYNN	52050	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	53	07/21/92
07/01/92	Monroe, Pina	BIRMINGHAM	AL	WANT, LYNN	52050	AIDS, UNSPECIFIED	CONNECTICUT GENERAL	ORTO CLM	SUCCESS	1	07/02/92
07/16/92	FLAS, ROBERTO	DOYAN	AL	WANT, LYNN	52050	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	0	07/16/92
07/15/92	ACKINSON, RICH	BIRMINGHAM	AL	WANT, LYNN	52050	NEOPLASM; UNKNOWN	EC/AS AL	P/A	SUCCESS	0	07/15/92
07/15/92	JOHN, KIRIT	DOYAN	AL	WANT, LYNN	52050	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	0	07/15/92
07/16/92	JOHN, KIRIT	DOYAN	AL	WANT, LYNN	52050	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	0	07/16/92
06/24/92	Wilson, Carl	LITTLE ROCK	AR	SMITH, DAN	52000	SARCOMA; UNSPECIFIED	MEDICAD	ORTO CLM	SUCCESS	0	06/24/92
06/06/92	Collins, Stanley	TEXARKANA	AR	STINER, KIMBERLY	53126	ACUTE MYELOID LEUKEMIA	MEDICARE	DEN-APPL	SUCCESS	51	07/27/92
02/12/92	RJA Infusion Inc.	GILBERT	AZ	PARLOUE, MAYNE	53250	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	1	02/13/92
08/19/92	Packer, Jeffrey	PHOENIX	AZ	PARLOUE, MAYNE	53250	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	0	08/19/92
08/27/92	Packer, Jeffrey	PHOENIX	AZ	PARLOUE, MAYNE	53250	CHRONIC RENAL FAILURE	MEDICARE	DEN-APPL	SUCCESS	1	08/28/92
08/27/92	Packer, Jeffrey	PHOENIX	AZ	PARLOUE, MAYNE	53250	CHRONIC RENAL FAILURE	ACCESS	ORTO CLM	SUCCESS	1	08/28/92
03/03/92	Wells, David	COTTAGEWOOD	AZ	PARLOUE, MAYNE	53250	CHRONIC RENAL FAILURE	MEDICARE	DEN-APPL	SUCCESS	2	03/03/92
06/18/92	Ryan, Michael	FLAGSTAFF	AZ	PARLOUE, MAYNE	53250	CHRONIC RENAL FAILURE	MEDICARE	ORTO CLM	SUCCESS	0	06/18/92
01/04/92	Cherrell, David	SCOTTSDALE	AZ	PARLOUE, MAYNE	53250	CHRONIC RENAL FAILURE	MEDICARE	DEN-APPL	SUCCESS	45	02/23/92
02/25/92	Quatfson, Ellen	PHOENIX	AZ	PARLOUE, MAYNE	53250	AMENIA	FHP	P/A	SUCCESS	58	04/23/92
05/18/92	Riglers, Stephen	OSMAID	CA	MASTASI, JR., PHILIP	53220	LUNG CANCER	MELLER ASSOCIATES	P/A	SUCCESS	1	05/19/92
02/26/92	Bendischewsky, Myron	NORTH RIDGE	CA	MASTASI, JR., PHILIP	53220	AIDS, UNSPECIFIED	RS CA	ORTO CLM	SUCCESS	2	02/28/92
06/13/92	Olmedo, Attilio	PALM SPRINGS	CA	CHIBET, TERENCE	53222	BREAST CANCER	PRINCIPAL MUTUAL	P/A	SUCCESS	0	06/13/92
02/27/92	Daguetto, Vincent	LOS ANGELES	CA	IGBAS, CYNTHIA	53223	CHRONIC RENAL FAILURE	MEDICARE (TRANSMETICA)	ORTO CLM	SUCCESS	0	02/27/92
01/24/92	Careline Pharmacy	PASADENA	CA	IGBAS, CYNTHIA	53223	SICKLE CELL ANEMIA	PRUDENTIAL	DEN-APPL	SUCCESS	196	03/05/92

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DATE OF CALL	CALLER	CITY	STATE	SALES REPRESENTATIVE	ORTHO PRODUCT LINE	JANUARY	DIAGNOSIS	INURER	ORIGINAL STATUS	CURRENT STATUS	DATE OF RESOLUTION
06/18/92	CASHMAN (SAN DIEGO),	SAN DIEGO	CA	MEYER, GARY		53226	AIDS, UNSPECIFIED	EMPLOYEES OF THE PROGRAM	P/A	SUCCESS	08/20/92
02/27/92	Sad, Chaleb	LONG BEACH	CA	UNKNOWN, TIMOTHY		53226	HYPOGLYCEMIA	SECURE HORIZONS HMO	ORTHO CLM	SUCCESS	08/05/92
04/15/92	Timon, Glenn	WHITTIER	CA	UNKNOWN, TIMOTHY		53226	CHRONIC RENAL FAILURE	MEDICARE (TRANSAMERICA)	ORTHO CLM	SUCCESS	08/05/92
05/11/92	Kumick, John	JOHNSTON	CA	UNKNOWN, TIMOTHY		53226	CHRONIC RENAL FAILURE	MEDICARE (TRANSAMERICA)	ORTHO CLM	SUCCESS	08/05/92
06/17/92	Brid, George	GLENDALE	CA	WOOD, KEITH		53227	CHRONIC RENAL FAILURE	CARE AMERICA	ORTHO CLM	SUCCESS	08/19/92
01/08/92	Tronette, Antonio	LOS ANGELES	CA	WOOD, KEITH		53227	AIDS, UNSPECIFIED	ES CA	ORTHO CLM	SUCCESS	08/05/92
04/16/92	Pichon, Howard	LOS ANGELES	CA	WOOD, KEITH		53227	AIDS, UNSPECIFIED	ES CA	ORTHO CLM	SUCCESS	08/05/92
05/20/92	Ingenite, Antonio	LOS ANGELES	CA	WOOD, KEITH		53227	AIDS, UNSPECIFIED	ES CA	ORTHO CLM	SUCCESS	08/05/92
06/06/92	Jedle, Mark	TORRANCE	CA	WOOD, KEITH		53227	AIDS, UNSPECIFIED	ES CA	ORTHO CLM	SUCCESS	08/05/92
05/14/92	Gabriel, Paul	LONG BEACH	CA	WOOD, KEITH		53227	AIDS, UNSPECIFIED	ES CA	ORTHO CLM	SUCCESS	08/05/92
03/19/92	Graham, Paul	LONG BEACH	CA	WOOD, KEITH		53227	AIDS, UNSPECIFIED	ES CA	ORTHO CLM	SUCCESS	08/05/92
07/07/92	Chais, Bart	SANTA MONICA	CA	FOUNTAIN, CHEVY		53228	CHRONIC RENAL FAILURE	CONNECTICUT GENERAL	ORTHO CLM	SUCCESS	08/05/92
04/03/92	Pochter, Margaret	SAN FRANCISCO	CA	BEUTLER, SPAN		53228	CHRONIC RENAL FAILURE	MEDICARE (TRANSAMERICA)	ORTHO CLM	SUCCESS	08/05/92
02/04/92	Welton, Nancy	STAMFORD	CA	ELSON, KATHLEEN		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
03/11/92	Escoe, Milton	HILL VALLEY	CA	ELSON, KATHLEEN		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
01/08/92	Oliver, Richard	PLEASANT	CA	WELSH, CHRYL		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
02/19/92	Cherney, Richard	PLEASANT	CA	WELSH, CHRYL		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
01/15/92	Oliver, Richard	PLEASANT	CA	WELSH, CHRYL		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
05/20/92	Claudio, John	SAN FRANCISCO	CA	WELSH, CHRYL		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
07/01/92	Callan, Wayne	LEADVILLE	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
03/27/92	Harrison, Mark	BOULDER	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
06/05/92	McNamee, Richard	DENVER	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
06/22/92	Weller, Henry	DURANGO	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
08/04/92	Malzer, Tom	ENGLEWOOD	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
07/07/92	Malzer, Henry	DURANGO	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
07/27/92	Calhoun, Raymond	DENVER	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
08/04/92	Alford, William	ENGLEWOOD	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
08/04/92	Whitney, Constantine	PUEBLO	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
03/20/92	Shapiro, Michael	AMERICA	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
05/19/92	Sattipeni, Frank	PUEBLO	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
05/05/92	Attling, Frank	DENVER	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92
06/21/92	Sattipeni, Frank	PUEBLO	CO	HILL, GEORGE		53229	CHRONIC RENAL FAILURE	TRAVELERS	ORTHO CLM	SUCCESS	08/05/92

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DATE OF CALL	CALLER	CITY	STATE	SALES REPRESENTATIVE	ORTHOPRODLINE	TELEPHONE	DIAGNOSIS	INSURER	ORIGINAL STATUS	CURRENT STATUS	DATE	DATE OF RESUBMITAL
03/12/92	Carly, Nina	WASHINGTON	DC	RAML, DONALD	CT	51022	HIV, UNSPECIFIED	METROPOLITAN LIFE	P/A	SUCCESS	1	03/13/92
01/24/92	COOPER, KIERAN	WASHINGTON	DC	RAML, DONALD	CT	51022	HIV, UNSPECIFIED	MEDICARE	ORTHO CLM	SUCCESS	5	01/29/92
07/29/92	Carly, Matthew	WASHINGTON	DC	RAML, DONALD	CT	51022	MULTIPLE MYELOMA	MEDICARE	ORTHO CLM	SUCCESS	0	01/29/92
06/03/92	Bla, Margaret	NEW HAVEN	CT	RAML, DONALD	CT	51022	CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	1	06/04/92
03/16/92	Bart, Frederick	WASHINGTON	DC	ASH, ROBERT	DC	51926	CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	2	03/18/92
07/31/92	Schmitt, Victor	WASHINGTON	DC	ASH, ROBERT	DC	51926	RENAL INSUFFICIENCY	ARTINA LIFE AND CASUALTY	P/A	SUCCESS	4	06/04/92
05/11/92	BERMAN, PETER	WASHINGTON	DC	ASH, ROBERT	DC	51926	CHRONIC RENAL FAILURE	BC/BS NATIONAL CAPITAL	P/A	SUCCESS	3	05/16/92
03/19/92	Gleibers, Susan	WASHINGTON	DC	ROBERT, DONA	DC	51926	CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	4	03/23/92
01/09/92	Bacon, III, Alfred	SEASIDE	DE	PETREE, DAVID	DE	51920	ANEMIA	MEDICARE	ORTHO CLM	SUCCESS	0	01/09/92
03/11/92	Martin, Eric	SEASIDE	DE	PETREE, DAVID	DE	51920	MULTIPLE MYELOMA	CIGNA	P/A	SUCCESS	2	03/13/92
07/19/92	Respirology Assoc, DE,	SEASIDE	DE	PETREE, DAVID	DE	51920	CHRONIC RENAL FAILURE	TRAVELERS	P/A	SUCCESS	3	05/22/92
06/05/92	Respirology Assoc, DE,	SEASIDE	DE	PETREE, DAVID	DE	51920	CHRONIC RENAL FAILURE	MAIL HANDLERS	P/A	SUCCESS	5	06/10/92
06/09/92	Respirology Assoc, DE,	SEASIDE	DE	PETREE, DAVID	DE	51920	CHRONIC RENAL FAILURE	BC/BS DE	ORTHO CLM	SUCCESS	0	06/05/92
06/11/92	Coer, Daniel	SEASIDE	DE	PETREE, DAVID	DE	51920	CHRONIC RENAL FAILURE	BC/BS DE	ORTHO CLM	SUCCESS	0	06/11/92
03/16/92	Harris, Frank	DOVER	DE	PETREE, DAVID	DE	51920	CHRONIC RENAL FAILURE	PRINCIPAL HEALTH CARE	ORTHO CLM	SUCCESS	7	03/23/92
04/02/92	Respirology Assoc, DE,	SEASIDE	DE	PETREE, DAVID	DE	51920	MULTIPLE MYELOMA	MEDICARE	DER-APPL	SUCCESS	0	04/02/92
06/02/92	Respirology Assoc, DE,	SEASIDE	DE	PETREE, DAVID	DE	51920	CHRONIC RENAL FAILURE	BC/BS DE	ORTHO CLM	SUCCESS	3	06/05/92
06/03/92	Miller, William	SEASIDE	DE	PETREE, DAVID	DE	51920	CHRONIC RENAL FAILURE	DOHNEY HEALTHWISE	ORTHO CLM	SUCCESS	1	06/04/92
06/31/92	SLONE, JOSEPH	SEASIDE	DE	PETREE, DAVID	DE	51920	CHRONIC RENAL FAILURE	CONNECTICUT GENERAL	P/A	SUCCESS	3	06/01/92
03/05/92	Sperti, Paul	S. MIAMI	FL	MURSON, III, WILLIAM	FL	52120	HIV, UNSPECIFIED	MEDICARE	ORTHO CLM	SUCCESS	0	03/05/92
04/29/92	Carlo, John	S. MIAMI	FL	MURSON, III, WILLIAM	FL	52120	CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	0	04/29/92
01/15/92	Kenny, Albert	MIAMI	FL	ROLAND, PAUL	FL	52121	CHRONIC RENAL FAILURE	MEDICARE	DER-APPL	SUCCESS	1	01/16/92
01/13/92	Kenny, Albert	MIAMI	FL	ROLAND, PAUL	FL	52121	CHRONIC RENAL FAILURE	MEDICARE	DER-APPL	SUCCESS	1	01/16/92
01/15/92	Orman, Steven	VERICE	FL	ROLAND, PAUL	FL	52121	APLASTIC/HEPATITIS A	MOUNTAIN STATE JOB	ORTHO CLM	SUCCESS	2	01/17/92
04/15/92	Roberts, Michael	KISSIMEE	FL	ROLAND, PAUL	FL	52121	CHRONIC RENAL FAILURE	MEDICARE	DER-APPL	SUCCESS	114	06/05/92
04/10/92	Orman, Steven	VERICE	FL	ROLAND, PAUL	FL	52121	CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	115	06/03/92
08/28/92	Verthelm, Michael	PORT ST. LUCY	FL	ROLAND, PAUL	FL	52121	CHRONIC RENAL FAILURE	UNITED GROUP SERVICES	ORTHO CLM	SUCCESS	4	06/01/92
06/13/92	Zendes, Stephen	SARASOTA	FL	ROLAND, PAUL	FL	52121	CHRONIC RENAL FAILURE	AMERICAN MINORITIES OF AME	ORTHO CLM	SUCCESS	1	06/14/92
06/13/92	Silverstein, Marc	SARASOTA	FL	ROLAND, PAUL	FL	52121	CHRONIC RENAL FAILURE	MEDICARE (TRAVELERS RE)	ORTHO CLM	SUCCESS	1	06/14/92
06/13/92	Ward, Herman	SARASOTA	FL	ROLAND, PAUL	FL	52121	CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	1	06/14/92
01/05/92	PAUL BEN NITA CARE,	MIAMI BEACH	FL	ROLAND, PAUL	FL	52121	CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	1	01/07/92

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04/14/92	Jones, Clifton	TOPEKA	KS	WELLOCK, JR., DAVID	51123		ALTA, UNSPECIFIED	BUSINESSMAN'S ASSURANCE MEDICARE	OKIG CLM	SUCCESS	113	06/05/92
04/23/92	Porter, Robert	TOPEKA	KS	WELLOCK, JR., DAVID	51123		CHRONIC RENAL FAILURE		OKIG CLM	SUCCESS	1	04/24/92
03/04/92	Cheng, Bruce	LOUISVILLE	KY	MURDO, DENNIS	51723		CHRONIC RENAL FAILURE	PRESCRIPTION CARD SERVICE	P/A	SUCCESS	0	03/04/92
03/26/92	Cheng, Bruce	LOUISVILLE	KY	MURDO, DENNIS	51723		CHRONIC RENAL FAILURE	MEDICARE	OKIG CLM	SUCCESS	0	03/26/92
04/30/92	DESMAR, TUSUF	ELIZABETHTOWN	KY	MURDO, DENNIS	51723		MELTILIS MYELOMA	ASTRA LIFE AND CASUALTY	P/A	SUCCESS	0	04/30/92
07/15/92	Carver, Anthony	TOMPKINSVILLE	KY	MURDO, DENNIS	51723		CHRONIC RENAL FAILURE	MEDICARE	OKIG CLM	SUCCESS	0	07/15/92
01/25/92	Reed, E. Douglas	LEXINGTON	KY	MURDO, DENNIS	51723		CHRONIC RENAL FAILURE	METROPOLITAN LIFE	OKIG CLM	SUCCESS	4	02/03/92
04/06/92	FARMAN, TOM	LEXINGTON	KY	MURDO, DENNIS	51723		CHRONIC RENAL FAILURE	MEDICARE	P/A	SUCCESS	73	04/18/92
03/18/92	FARMAN, TOM	LEXINGTON	KY	MURDO, DENNIS	51723		DIABETES MELLITUS	HEALTHWISE	OKIG CLM	SUCCESS	92	04/18/92
06/01/92	ESPINLEY, NANCY TREBAG,	LOUISVILLE	KY	MURDO, DENNIS	51723		CHRON. DIABETES/PHOSPHATIS	CHAMPUS	OKIG CLM	SUCCESS	92	04/18/92
03/24/92	Hendrix, Ricky	SHREVEPORT	LA	HALL, MELISSA	52923		CHRONIC RENAL FAILURE	MEDICARE	OKIG CLM	SUCCESS	1	03/25/92
01/20/92	Morham, Leroy	NEW ORLEANS	LA	HALL, MELISSA	52923		WILDFLOWERS	IC/AS AL	OKIG CLM	SUCCESS	198	07/24/92
06/24/92	Salway, John	LAFAYETTE	LA	HALL, MELISSA	52923		ALUMINA	MEDICARE	OKIG CLM	SUCCESS	0	06/24/92
07/10/92	Flood, Steven	MORTON	MA	STILLSON, ANDREAS	51020		CHRONIC RENAL FAILURE	MEDICARE	OKIG CLM	SUCCESS	0	07/10/92
05/20/92	Fare, Laila	BOSTON	MA	SMALL, SUSAN	51020		CHRONIC RENAL FAILURE	MEDICARE	OKIG CLM	SUCCESS	1	05/21/92
06/31/92	Ueda, Peggy	BOSTON	MA	SMALL, SUSAN	51020		CHRONIC RENAL FAILURE	TRANSPORT LIFE	P/A	SUCCESS	0	06/31/92
02/19/92	Berrevichio, John	ATLANTA	MA	MORG, RET KEY	51021		CHRONIC RENAL FAILURE	IC/BS MA	P/A	SUCCESS	0	02/19/92
06/09/92	ROSENBAUM, CHARLES	MALDEN	MA	RAHEL, DONALD	51022		BREAST CANCER	MODX (IC/BS)	OKIG CLM	SUCCESS	1	06/10/92
01/07/92	Delano, Michael	PITTSFIELD	MA	TAGGART, TERENCE	51023		CHRONIC RENAL FAILURE	MEDICARE	OKIG CLM	SUCCESS	2	01/09/92
03/19/92	Delano, Michael	PITTSFIELD	MA	O'LEARY, RICH	51032		CHRONIC RENAL FAILURE	BENEFITHE HEALTH PLAN	OKIG CLM	SUCCESS	4	03/23/92
04/13/92	Fleming, Edward	GLoucester	MA	ROMO, ANA MARIA	51032		MULTIPLE MYELOMA	MODX (IC/BS)	OKIG CLM	SUCCESS	0	04/13/92
04/24/92	Hochstein, Stephen	PLYMOUTH	MA	ROMO, ANA MARIA	51126		MYELOIDPLASTIC SYNDROME	AMERICAN FOREIGN SVC PRO	OKIG CLM	SUCCESS	1	05/06/92
05/03/92	TRET, CHARLES	BOSTON	MA	ROMO, ANA MARIA	51126		CHRONIC RENAL FAILURE	IC/BS MA	OKIG CLM	SUCCESS	1	05/03/92
03/02/92	FARMAN, Kenneth	WORCESTER	MA	DANDY, PATRICIA	52620		CHRONIC RENAL FAILURE	TRAVELERS	OKIG CLM	SUCCESS	1	03/02/92
06/03/92	SMITH, DAVID	EASTON	MA	PETREE, DAVID	51920		CHRONIC RENAL FAILURE	IC/BS MA	P/A	SUCCESS	1	06/04/92
07/29/92	Zyler, Samuel	BALTIMORE	MD	PETREE, DAVID	51920		CHRONIC RENAL FAILURE	MEDICARE/TRAVELERS BSJ	OKIG CLM	SUCCESS	1	07/30/92
01/06/92	Sasow, Denise	BALTIMORE	MD	PETREE, DAVID	51920		CHRONIC RENAL FAILURE	MEDICARE(PA BS)	OKIG CLM	SUCCESS	0	01/06/92
07/18/92	Singer, Dave	BALTIMORE	MD	PETREE, DAVID	51920		CHRONIC RENAL FAILURE	MEDICARE(PA BS)	OKIG CLM	SUCCESS	0	07/18/92
07/07/92	Wood, William	EASTON	MD	PETREE, DAVID	51920		CHRONIC RENAL FAILURE	MEDICARE(IC/BS MA)	OKIG CLM	SUCCESS	0	07/07/92

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05/04/92	SCHWARTZ, MARTIN	KINNEAPOLIS	52820	SCOTT, BELODA	P/A	SUCCESS	0	05/04/92
05/30/92	Barman, David	KINNEAPOLIS	52821	KIMMEL, JOSEPH	ORIG CLN	SUCCESS	1	05/31/92
06/19/92	OrthoLife Consultants,	EDINA	52822	ANDERSON, DENORAN	ORIG CLN	SUCCESS	0	06/19/92
06/29/92	Rosenberg, Mark	KINNEAPOLIS	52822	ANDERSON, DENORAN	ORIG CLN	SUCCESS	0	06/29/92
01/13/92	Klumpp, David	ST. LOUIS	53121	WARREN, R. LANCE	MEDICAL CHOICE (MPC)	SUCCESS	205	01/05/92
06/02/92	Klumpp, William	SPRINGFIELD	53121	WARREN, R. LANCE	PRUDENTIAL	SUCCESS	0	06/04/92
03/26/92	Edy, Charles	ST. LOUIS	53121	WARREN, R. LANCE	ORIG CLN	SUCCESS	2	03/26/92
06/04/92	Adams, Nancy	KANSAS CITY	53121	WARREN, R. LANCE	P/A	SUCCESS	0	06/04/92
06/15/92	Adams, Nancy	KANSAS CITY	53123	WELLOCK, JR., OLIVER	NO STATE MED. CARE PLAN	SUCCESS	6	06/15/92
06/09/92	Zentgraf, Steven	BRIDGEPORT	53123	MEDLOCK, JR., OLIVER	MEDICAL CHOICE (MPC)	SUCCESS	0	06/09/92
06/09/92	Stonest Aphrology,	KANSAS CITY	53124	BRACKENRIDGE, BARBARA	UNITED FOOD & COMMERCIAL	SUCCESS	2	06/11/92
06/05/92	Kronfeld, M.D.	GREENVILLE	53226	WILLIAMS, JAMES	ORIG CLN	SUCCESS	0	06/09/92
06/03/92	U of MS Renal Clinic,	JACKSON	53226	WILLIAMS, JAMES	ORIG CLN	SUCCESS	0	06/05/92
07/20/92	Houston, Garyann	JACKSON	53226	WILLIAMS, JAMES	ORIG CLN	SUCCESS	0	07/20/92
06/18/92	Lenzi, Chris	LAME DEER	53826	DEZELLE-FITE, MPH, RALPH	ORIG CLN	SUCCESS	0	06/18/92
04/02/92	Scott, David	VILMINGTON	53925	VANARSALL, ROBERT	MEDICAL CHOICE (MPC)	SUCCESS	125	04/05/92
01/07/92	McQuitty, Billy	VILMINGTON	52400	WILLIAMS, PAUL	DEP-APPL	SUCCESS	1	01/07/92
02/06/92	Caroline Kidney Assn,	GREENSBORO	52400	WILLIAMS, PAUL	ORIG CLN	SUCCESS	6	02/06/92
02/11/92	Cook, Charles	SALEIGH	52400	WILLIAMS, PAUL	P/A	SUCCESS	1	02/11/92
03/16/92	Caroline Kidney Assn,	GREENSBORO	52400	WILLIAMS, PAUL	P/A	SUCCESS	2	03/16/92
06/10/92	Johnson, Harold	GREENSBORO	52400	WILLIAMS, PAUL	P/A	SUCCESS	2	06/10/92
02/27/92	Narrington, Delmore	WINSTON-SALEM	52400	WILLIAMS, PAUL	P/A	SUCCESS	6	02/27/92
01/21/92	Sunaira, Robert	GREENSBORO	52400	WILLIAMS, PAUL	P/A	SUCCESS	19	01/21/92
04/09/92	ECU School of Med.,	GREENSBORO	52400	WILLIAMS, PAUL	ORIG CLN	SUCCESS	1	04/09/92
06/03/92	Yaffe, Mark	GREENSBORO	52400	WILLIAMS, PAUL	ORIG CLN	SUCCESS	110	06/03/92
06/18/92	Yaffe, Mark	GREENSBORO	52400	WILLIAMS, PAUL	ORIG CLN	SUCCESS	2	06/18/92
03/25/92	Olin, David	GREENSBORO	52400	WILLIAMS, PAUL	ORIG CLN	SUCCESS	4	03/25/92
03/04/92	REILLY, THOMAS	FARGO	52624	BAATHEER-SCOTT, BELODA	ORIG CLN	SUCCESS	1	03/04/92

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06/24/92	Amn, 81pin	STAMFORD	NO	RAUTINICK-SCOTT, NEMOIA	51024	AMENIA	MAIL HANDLERS	ORIG CLM	SUCCESS	2	06/26/92
01/23/92	Tucker, James	EVANDER	GA	SCOTT, JOHN	51027	DIABETIC NEPHROPATHY	SC/BS NH	P/A	SUCCESS	0	01/23/92
07/15/92	Peralta, Robert	LITTLETON	CO	SCOTT, JOHN	51027	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	0	07/15/92
02/11/92	Nikoloff, Richard	EDISON	NJ	MAZUR, MARK	51521	HYPOCALCAEMIA	NJ HIGHWAY AUTHORITY	P/A	SUCCESS	7	02/18/92
01/14/92	Nikoloff, Richard	EDISON	NJ	MAZUR, MARK	51521	LUNG CANCER	TRANSPORT LIFE	ORIG CLM	SUCCESS	167	06/09/92
06/03/92	Nikoloff, Richard	EDISON	NJ	MAZUR, MARK	51521	CHRONIC RENAL FAILURE	TRANSPORT LIFE	ORIG CLM	SUCCESS	2	06/05/92
06/03/92	Kia, Hugh	NEW BRUNSWICK	NJ	MAZUR, MARK	51521	AIDS, UNSPECIFIED	SC/BS NJ	ORIG CLM	SUCCESS	2	06/05/92
06/17/92	Dora, Parvez	TOWNS AVE	NJ	MAZUR, MARK	51521	BLADDER CANCER	MEDICARE	ORIG CLM	SUCCESS	4	06/21/92
06/17/92	Birchler, U.	ROCKY HILL	NJ	LIODORI, PHIL	51522	CHRONIC RENAL FAILURE	EMPIRE BC/BS	ORIG CLM	SUCCESS	0	06/19/92
05/15/92	Lewenthal, Dennis	SPRINGFIELD	NJ	RIEBA, DAVID	51528	MULTIPLE MYELOMA	MEDICARE	ORIG CLM	SUCCESS	24	06/10/92
06/16/92	Stryker, David	ALBUQUERQUE	NM	MCLELLAN, DEAN	53225	AIDS, UNSPECIFIED	HEALTH PLUS	ORIG CLM	SUCCESS	3	06/19/92
06/03/92	Lewenthal, Alan	SANTA FE	NM	MACALUSO, MARY BETH	53250	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	0	06/03/92
01/07/92	PROSP, Richard	ALBANY	NY	TAGGART, TERENCE	51025	RENAL INSUFFICIENCY	MEDICARE (SS WESTERN NY)	P/A	SUCCESS	0	01/07/92
02/24/92	Koffman, Mark	GLASS FALLS	NY	TAGGART, TERENCE	51025	CHRONIC RENAL FAILURE	MEDICARE (SS WESTERN NY)	ORIG CLM	SUCCESS	0	02/24/92
02/25/92	Shah, Ashok	POUGHKEEPSIE	NY	TAGGART, TERENCE	51025	CHRONIC RENAL FAILURE	MEDICARE (EMPIRE BC/BS)	ORIG CLM	SUCCESS	162	08/05/92
03/02/92	Kilora, Robert	ALBANY	NY	TAGGART, TERENCE	51025	CHRONIC RENAL FAILURE	SC/BS NY	ORIG CLM	SUCCESS	1	03/03/92
05/04/92	James, Garret	SCHENECTADY	NY	TAGGART, TERENCE	51025	CHRONIC RENAL FAILURE	CSEA	ORIG CLM	SUCCESS	3	05/09/92
06/12/92	Churchill, David	LIVERPOOL	NY	FEARTMAN, KEVIN	51029	THROMBOCYTHAEMIA	UNIT	ORIG CLM	SUCCESS	1	06/13/92
06/27/92	Good Samaritan Hosp, B	WEST HELIP	NY	D'CONNELL, MARY	51121	CHRONIC RENAL FAILURE	ACTHA LIFE AND CASUALTY	P/A	SUCCESS	0	06/27/92
07/09/92	STATZICKI, MARY	ALBANY	NY	MACALUSO, MARY BETH	51125	CHRONIC RENAL FAILURE	MEDICARE (EMPIRE BC/BS)	ORIG CLM	SUCCESS	5	07/14/92
07/10/92	Shulman, Fred	FREEPORT	NY	MACALUSO, MARY BETH	51125	CHRONIC RENAL FAILURE	MEDICARE (EMPIRE BC/BS)	ORIG CLM	SUCCESS	0	07/14/92
07/16/92	Steen, James	ROCHESTER	NY	GLT, ROE	51220	CHRONIC RENAL FAILURE	PREFERRED CARE	ORIG CLM	SUCCESS	3	07/16/92
03/26/92	Mohr, Thomas	STRAUSBURG	NY	GLT, ROE	51220	CHRONIC RENAL FAILURE	CONNECTICUT GENERAL	ORIG CLM	SUCCESS	1	03/27/92
01/14/92	Cortell, Stanley	NEW YORK	NY	SINGHRA, MARINA	51300	OVARIAN CANCER	EMPIRE BC/BS	ORIG CLM	SUCCESS	204	06/05/92
06/20/92	Parker, Judith	BAOK	NY	SINGHRA, MARINA	51321	CHRONIC RENAL FAILURE	MEDICARE (EMPIRE BC/BS)	ORIG CLM	SUCCESS	0	06/20/92
06/20/92	Rei, Kent	LONG ISLAND	NY	SINGHRA, MARINA	51321	CHRONIC RENAL FAILURE	MEDICARE (EMPIRE BC/BS)	ORIG CLM	SUCCESS	0	06/20/92
06/16/92	PRESE, ROBERT	NEW YORK	NY	QUINN, LOLLY	51321	MYELOID LEUKAEMIA	TANVILERS	ORIG CLM	SUCCESS	0	06/16/92
07/24/92	Steln, Martin	NEW YORK	NY	QUINN, LOLLY	51321	AIDS, UNSPECIFIED	EMPIRE BC/BS	ORIG CLM	SUCCESS	0	07/24/92
07/24/92	Copato, Thomas	NEW YORK	NY	QUINN, LOLLY	51321	CHRONIC RENAL FAILURE	PHILADELPHIA	P/A	SUCCESS	0	07/24/92
01/31/92	Zaine, Edward	GAUDEN CITY	NY	MC, JENNIFER	51330	OVARIAN CANCER	MEDICARE (EMPIRE BC/BS)	ORIG CLM	SUCCESS	4	01/31/92

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01/24/92	Cyril, Lawrence	STONEYBROOK	NY	NO, JENNIFER	51330	51330	ALBEMAR	MEDICARE	DER-APPL	SUCCESS	67	02/21/92
02/28/92	Marino, John	PORT JEFFERSON	NY	NO, JENNIFER	51330	51330	CHRONIC RENAL FAILURE	NY PRESCRIPTION SERVICES	P/A	SUCCESS	55	04/22/92
05/13/92	FEITEN, JAMES	GLENCORE	NY	NO, JENNIFER	51330	51330	MULTIPLE MYELOMA	EMPIRE SVCS	DER-APPL	SUCCESS	2	05/15/92
01/03/92	Winer, Bernard	BRONX	NY	CARLISLE, RALPH	51332	51332	CHRONIC RENAL FAILURE	MEDICARE (EMPIRE BC/BS)	DER-APPL	SUCCESS	0	01/02/92
06/19/92	PAPOLLO, PAUL	KINGSTON	NY	VAL BAKER, MARK	51333	51333	CHRONIC RENAL FAILURE	MEDICARE (EMPIRE BC/BS)	DER-APPL	SUCCESS	0	06/19/92
02/26/92	Stallings, Lawrence	LAUREL	OH	MONR, STUART	51200	51200	ALBEMAR	ALBEMAR	DER-APPL	SUCCESS	0	02/26/92
02/05/92	Billon, John	COLUMBUS	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	02/05/92
02/24/92	Rozicki, Gregory	CANTON	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	1	02/24/92
04/16/92	Adams, John	CANTON	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	4	04/16/92
05/29/92	Adams, John	CANTON	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	3	06/01/92
07/20/92	ST SHAI MED CENTER,	CLEVELAND	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	07/20/92
08/21/92	Kuntze, Duane	ALLIANCE	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	08/21/92
08/12/92	Squire, Jend	CANTON	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	08/12/92
08/27/92	McFetee, Patrick	WARRINGTON	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	08/27/92
07/06/92	Lubin, Alan	COLUMBUS	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	07/06/92
04/16/92	Ray, William	COLUMBUS	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	04/16/92
04/29/92	Ray, William	COLUMBUS	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	04/29/92
04/03/92	Robert, Lee	COLUMBUS	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	1	04/03/92
01/06/92	Ray, William	COLUMBUS	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	45	02/20/92
02/07/92	Gerard, Henry	LIMA	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	117	06/21/92
07/01/92	INER, DAVID	LIMA	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	1	07/01/92
06/17/92	Ray, William	COLUMBUS	OH	MONR, STUART	51200	51200	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	1	06/17/92
07/02/92	Kennedy, John	TULSA	OK	HALLMELL, ERIC	53122	53122	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	4	07/02/92
01/28/92	KENNEL, THOMAS	TULSA	OK	HALLMELL, ERIC	53122	53122	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	63	03/21/92
05/19/92	Van Nott, Barry	TULSA	OK	HALLMELL, ERIC	53122	53122	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	05/19/92
03/02/92	Reed, Richard	SALON	OK	WEST, DAVID	53624	53624	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	03/02/92
06/11/92	MUSCHEL, STUART	SPRINGFIELD	OK	WEST, DAVID	53624	53624	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	06/11/92
06/27/92	Saghai, Darlan	MOORESPORT	PA	VACANT TERRITORY,	51220	51220	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	0	06/27/92
01/23/92	TOPI, FRANCIS	ERIE	PA	GIBB, ROSE	51220	51220	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	50	03/13/92
02/14/92	Bailey, Robert	ELLWOOD CITY	PA	SHINSMOCK, ELIZABETH	51225	51225	CHRONIC RENAL FAILURE	ALBEMAR	DER-APPL	SUCCESS	5	02/14/92

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05/26/92	Harlan, Anthony	PITTSBURGH	PA	SHIRSHOCK, ELIZABETH	51225	51225	OVARIAN CANCER	SC WESTERN PA	ORIG CLM	SUCCESS	2	05/28/92
07/01/92	Chines, Carmen	JOHNSTOWN	PA	SHIRSHOCK, ELIZABETH	51225	51225	CHRONIC RENAL FAILURE	MEDICAID	ORIG CLM	SUCCESS	5	07/04/92
06/18/92	Luparello, J.	PITTSBURGH	PA	SHIRSHOCK, ELIZABETH	51225	51225	CHRONIC RENAL FAILURE	MEDICAID	ORIG CLM	SUCCESS	0	06/18/92
08/03/92	Basel, Ramef	GREENSBURG	PA	SHIRSHOCK, ELIZABETH	51225	51225	CHRONIC RENAL FAILURE	ACTA LIFE AND CASUALTY	ORIG CLM	SUCCESS	0	08/03/92
05/29/92	OVERLY, VILIE	LATROBE	PA	SHIRSHOCK, ELIZABETH	51225	51225	BREAST CANCER	MEDICARE (TRAVELERS RT)	ORIG CLM	SUCCESS	49	05/29/92
06/11/92	UnionOne Hospital, S	UNIONTOWN	PA	SHIRSHOCK, ELIZABETH	51225	51225	MULTIPLE MYELOMA	MEDICARE	ORIG CLM	SUCCESS	0	07/30/92
06/26/92	MC GILL, RITA	PITTSBURGH	PA	SHIRSHOCK, ELIZABETH	51225	51225	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	0	06/26/92
06/15/92	WYMER, WILLIAM	JOHNSBURG	PA	SHIRSHOCK, ELIZABETH	51225	51225	OVARIAN CANCER	SC/RS PA	ORIG CLM	SUCCESS	0	06/15/92
07/22/92	MC GILL, RITA	PITTSBURGH	PA	SHIRSHOCK, ELIZABETH	51225	51225	CHRONIC RENAL FAILURE	TRAVELERS	ORIG CLM	SUCCESS	1	07/22/92
06/19/92	Gribick, Michael	PITTSBURGH	PA	SHIRSHOCK, ELIZABETH	51225	51225	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	0	06/19/92
06/24/92	Adler,	BRANDTOWN	PA	SHIRSHOCK, ELIZABETH	51225	51225	NEPHROSCLEOSIS	SC WESTERN PA	ORIG CLM	SUCCESS	1	06/24/92
06/24/92	Christian, Robert	BRANDTOWN	PA	SHIRSHOCK, ELIZABETH	51225	51225	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	0	06/24/92
07/11/92	Marlin, James	LARITTON	PA	CICI, JOSEPH	51524	51524	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	0	07/11/92
07/17/92	Levin, Ron	PHILADELPHIA	PA	CICI, JOSEPH	51524	51524	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	0	07/17/92
07/17/92	Shupar, Samuel	LANCASTER	PA	CICI, JOSEPH	51524	51524	CHRONIC RENAL FAILURE	SC/RS PA	ORIG CLM	SUCCESS	3	07/17/92
04/02/92	ROBERT, DAVID	LANCASTER	PA	CICI, JOSEPH	51524	51524	CHRONIC RENAL FAILURE	MEDICAID	P/A	SUCCESS	1	04/02/92
06/12/92	ROBERT, MARY	WEST REDDING	PA	DEWEY, JOHN	51524	51524	AIDS, UNSPECIFIED	SC/RS PA	ORIG CLM	SUCCESS	3	06/12/92
01/21/92	Benjamin, Joseph	LANCASTER	PA	CICI, JOSEPH	51525	51525	RENAL INSUFFICIENCY	SC WESTERN PA	P/A	SUCCESS	13	02/03/92
02/12/92	Schlaifer, Charles	LANCASTER	PA	GOOD, DONIE	51525	51525	CHRONIC RENAL FAILURE	FREEDOM HEALTH	ORIG CLM	SUCCESS	8	02/28/92
07/23/92	Option Care,	LANCASTER	PA	GOOD, DONIE	51525	51525	HY, UNSPECIFIED	INDEPENDENCE BC	P/A	SUCCESS	5	07/28/92
08/28/92	Pierotti, Richard	LANCASTER	PA	GOOD, DONIE	51525	51525	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	3	08/31/92
08/23/92	Silver, Bruce	LANCASTER	PA	GOOD, DONIE	51525	51525	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	0	08/23/92
04/02/92	Urlich, Francis	LANCASTER	PA	GOOD, DONIE	51525	51525	CHRONIC RENAL FAILURE	INDEPENDENCE BC	ORIG CLM	SUCCESS	5	04/02/92
04/16/92	Bray, Susan	LANCASTER	PA	GOOD, DONIE	51525	51525	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	7	04/16/92
03/09/92	REPARADO ASSOC,	LANCASTER	PA	GOOD, DONIE	51525	51525	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	SUCCESS	0	03/09/92
08/24/92	Borkin, Harvy	LANCASTER	PA	GOOD, DONIE	51525	51525	RENAL INSUFFICIENCY	GREAT WEST	ORIG CLM	SUCCESS	0	08/24/92
06/18/92	BOGART, ALTHA	PHILADELPHIA	PA	GOOD, DONIE	51525	51525	MYELOIDYPLASTIC SYNDROME	RAPP & CO	ORIG CLM	SUCCESS	26	07/14/92
04/06/92	Orel, John	CHARLESTON	SC	RAIFLIN, CHARLIE	51900	51900	RENAL INSUFFICIENCY	PROVIDENT LIFE AND ACCIDE	P/A	SUCCESS	0	04/06/92
05/07/92	Greenville Mem Hosp,	GREENVILLE	SC	DAVIS, MELANIE	52421	52421	MYELOIDYPLASTIC SYNDROME	MEDICARE	P/A	SUCCESS	76	07/22/92
01/16/92	Dahlan, Matthew	LANCASTER	PA	THOMPSON, BENNIE	52100	52100	CHRONIC RENAL FAILURE	SC/RS TN	P/A	SUCCESS	26	02/11/92
04/23/92	Vanderbilt Univ Hosp,	NASHVILLE	TN	THOMPSON, BENNIE	52100	52100	CHRONIC RENAL FAILURE	MEDICAID	P/A	SUCCESS	0	04/23/92

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01/29/92	Macdonnell, Robert	FAIRVILLE	TX	THOMPSON, DENISE	52100		CHRONIC RENAL FAILURE	BC/RS TX	ORTHO CLM	SUCCESS	62	03/31/92
07/28/92	Reid, William	ONE RIDGE	TX	WURCE, MELANIE	52423		CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	2	07/30/92
02/10/92	Wach, Fred	MEMPHIS	TX	MILLARAY, JAMES	52426		END STAGE RENAL DISEASE	MEDICARE	P/A	SUCCESS	0	02/10/92
05/21/92	Schwarzkopf, John	MEMPHIS	TX	MILLARAY, JAMES	52426		PROSTATE CANCER	MEDICARE	ORTHO CLM	SUCCESS	0	05/21/92
02/10/92	Toum, J. Dudley	AUSTIN	TX	SCALLAM, JIM, CASSIE	52922		CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	0	02/10/92
05/27/92	Young, Mark	EL PASO	TX	SCALLAM, JIM, CASSIE	52922		PROSTATE CANCER	EMULCON	P/A	SUCCESS	1	05/26/92
04/14/92	Quadrante, Fernando	EL PASO	TX	SCALLAM, JIM, CASSIE	52922		CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	0	04/14/92
06/05/92	GREEN III, J.S.	TEMPLE	TX	ROULET, WAC	52922		CHRONIC RENAL DISEASE	MEDICARE	ORTHO CLM	SUCCESS	0	06/05/92
08/19/92	McKenney, Scott	BEAUMONT	TX	GRAY, PHILIP	52934		CHRONIC LYMPHOCTIC LEUK	MEDICARE	ORTHO CLM	SUCCESS	2	08/21/92
01/02/92	Morell, Guillermo	HOUSTON	TX	DUPRE, DANIEL	53100		CHRONIC RENAL FAILURE	BC/RS TX	ORTHO CLM	SUCCESS	0	01/02/92
01/03/92	Morell, Guillermo	HOUSTON	TX	DUPRE, DANIEL	53100		CHRONIC RENAL FAILURE	ALTA	ORTHO CLM	SUCCESS	3	01/04/92
01/03/92	Morell, Guillermo	HOUSTON	TX	DUPRE, DANIEL	53100		CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	0	01/03/92
04/22/92	Dolan Home Therapy,	DALLAS	TX	CALLAWAY, DAVID	53120		CHRONIC RENAL FAILURE	LEGAL SECURITY	P/A	SUCCESS	2	04/24/92
06/19/92	Adams, John	ARLINGTON	TX	LEFSCHE, BENJAMIN	53125		LIVER CANCER	EMULCON	P/A	SUCCESS	5	06/24/92
06/10/92	Thur, Jamudiah	DALLAS	TX	RINKER, KIMBERLY	53126		MULTIPLE MYELOMA	MEDICARE	ORTHO CLM	SUCCESS	55	06/24/92
03/28/92	Redow, Mark	FORT WORTH	TX	RINKER, KIMBERLY	53126		BLADDER CANCER	PRINCIPAL MUTUAL LIFE	ORTHO CLM	SUCCESS	0	03/28/92
05/26/92	Redow, Mark	FORT WORTH	TX	RINKER, KIMBERLY	53126		MOCKINGBIRD DISEASE	JEFFERSON PILOT	P/A	SUCCESS	0	05/26/92
06/10/92	OLD CASTLE, LINDA	GERKINSON	TX	RINKER, KIMBERLY	53126		ATLANTIC/NEPHROTIC ANEMIA	ANAP	ORTHO CLM	SUCCESS	0	06/10/92
07/13/92	Dave, Ajit	DENTON	TX	RINKER, KIMBERLY	53126		BLADDER CANCER	MEDICARE	ORTHO CLM	SUCCESS	0	07/13/92
02/13/92	Beltz, Richard	HOUSTON	TX	QUINTANSON, SANDRA	53129		ATLANTIC/NEPHROTIC ANEMIA	ANYRIN	ORTHO CLM	SUCCESS	5	02/13/92
03/24/92	Bernard, Robert	HOUSTON	TX	QUINTANSON, SANDRA	53129		CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	0	03/24/92
02/03/92	Bravo, Cesar	HOUSTON	TX	QUINTANSON, SANDRA	53129		CHRONIC RENAL FAILURE	HEART OF AMERICA	ORTHO CLM	SUCCESS	1	02/04/92
06/13/92	Shah, Suman	HOUSTON	TX	QUINTANSON, SANDRA	53129		AIDS, UNSPECIFIED	PRUCARE	ORTHO CLM	SUCCESS	6	06/23/92
06/06/92	Koblitzi, Carl	SALT LAKE CITY	UT	RUSSELL, JOHN	53601		CHRONIC RENAL FAILURE	MEDICARE	ORTHO CLM	SUCCESS	1	06/09/92
07/21/92	Thor, Elisabet	SALT LAKE CITY	UT	BURTON, MICHAEL	53620		CHRONIC RENAL FAILURE	REALTYWISE BC/RS OF UTAH	P/A	SUCCESS	0	07/21/92
06/25/92	Evans, Thomas	SALT LAKE	UT	BURTON, MICHAEL	53620		AIV, UNSPECIFIED	MEDICARE	GEN-APPL	SUCCESS	1	06/26/92
06/11/92	Ayer, Shashidharan	FAIRVILLE	VA	WILLIS, LISA	51923		CHRONIC RENAL FAILURE	LADON DELANE FUND	ORTHO CLM	SUCCESS	6	06/19/92
01/27/92	Kear, Charles	CHARLOTTESVILLE	VA	WILLIS, LISA	51923		WILKINSON'S DISEASE	MEDICARE/TRAVELERS	ORTHO CLM	SUCCESS	64	03/31/92
02/07/92	Richards, Paul	MILASKI	VA	WILLIS, LISA	51923		CHRONIC RENAL FAILURE	MEDICARE/TRAVELERS	ORTHO CLM	SUCCESS	0	02/07/92
02/26/92	Kear, Charles	CHARLOTTESVILLE	VA	WILLIS, LISA	51923		ATELORIBOSIS	BC/RS VA	P/A	SUCCESS	132	02/05/92
05/10/92	SILVERMAN, BRUCE	RICHMOND	VA	WILLIS, LISA	51923		END STAGE RENAL DISEASE	BC/RS VA	ORTHO CLM	SUCCESS	0	05/10/92

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07/20/92	Dalmarus-Cowan, S. A.	NORFOLK	VA	WILLIT, LISA	51925	51925	CHRONIC RENAL DISEASE	CHAMPUS	ORIG CLM	SUCCESS	0	07/28/92
07/21/92	McLean, Robert	ARLINGTON	VA	WILLIAMS, MARK	51927	51927	RTV, UNSPECIFIED	PRUDENTIAL MUTUAL LIFE	ORIG CLM	SUCCESS	3	07/24/92
07/18/92	Vendettone, R.	NORFOLK	VA	THOMPSON, MARIE	51931	51931	CHRONIC RENAL FAILURE	MEDICAID	P/A	SUCCESS	0	07/16/92
07/16/92	Wickert, Thomas	NORFOLK	VA	THOMPSON, MARIE	51931	51931	CHRONIC RENAL FAILURE	MEDICARE(TRAVERSE)	ORIG CLM	SUCCESS	0	07/16/92
06/24/92	Wickner, Gregory	CLINTON	WA	FORD, NATCHI	52628	52628	CHRONIC RENAL FAILURE	METROPOLITAN	ORIG CLM	SUCCESS	2	06/26/92
02/12/92	Schneider, Paul	TACOMA	WA	WEST, DAVID	52626	52626	CHRONIC RENAL FAILURE	CHAMPUS	ORIG CLM	SUCCESS	1	02/13/92
01/09/92	Kellogg, Elizabeth	LA CROSSE	WI	KANTAKA-SCOTT, BRENDA	52624	52624	MYELODYPLASTIC SYNDROME	CLM MANAGEMENT SERVICES	P/A	SUCCESS	42	02/20/92
05/19/92	PAVELA, STEPHEN	LA CROSSE	WI	KANTAKA-SCOTT, BRENDA	52624	52624	CHRON. GLOMERULONEPHRITIS	CUSTOM BENEFIT ADM	P/A	SUCCESS	1	05/20/92
01/09/92	Racine Medil Clinic,	LA CROSSE	WI	KUMEL, JOSEPH	52621	52621	APLASTIC/NEUTROPENIA	METROPOLITAN	P/A	SUCCESS	81	03/30/92
06/17/92	FORD Du Lac Clinic,	FOND DU LAC	WI	KUMEL, JOSEPH	52621	52621	APLASTIC/NEUTROPENIA	MEDICAID	ORIG CLM	SUCCESS	51	06/07/92
06/19/92	Lee, David	CHARLESTON	WY	LEASE, RIM LYNN	51722	51722	MULTIPLE MYELOMA	PUBLIC EMPLOYEES INS ADHI	ORIG CLM	SUCCESS	7	06/26/92
03/06/92	Chapman, George	MARTINSBURG	WV	WILLIAMS, MARK	51927	51927	CHRONIC RENAL FAILURE	MEDICAID	ORIG CLM	SUCCESS	5	03/11/92

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1/10/92	Shaw, Richard	LAUGHER	CA	MARTINI, JR., PHILIP	53220	APLASTIC/REFRACT ANEMIA	MEDICARE (TRANSMERICA)	DER-APPL	DENIED	01/20/92
1/11/92	Gordon, Earl	LOS ANGELES	CA	MARTINI, JR., PHILIP	53220	CHRONIC RENAL FAILURE	MEDICARE (TRANSMERICA)	DER-APPL	DENIED	07/02/92
1/21/92	Gottlieb, Michael	SHERMAN OAKS	CA	MARTINI, JR., PHILIP	53220	AIDS, UNSPECIFIED	EMPIRE BC/BS	DER-APPL	DENIED	01/21/92
5/13/92	Shall, Mary	SIXT VALLEY	CA	MARTINI, JR., PHILIP	53220	NON-PRODUCTIVE LYMPHOMA	METROPOLITAN LIFE	DER-APPL	DENIED	08/15/92
5/24/92	WOMAN, IRENEA	CONINA	CA	UNION, TIMOTHY	53226	CHRONIC RENAL FAILURE	BALL UNION CLASS FILING	DER-APPL	DENIED	08/24/92
5/15/92	Berenson, Jim	SAUTELL BLVD	LA	WOOD, KEITH	53227	MULTIPLE MYELOMA	METROPOLITAN	DER-APPL	DENIED	07/24/92
5/12/92	Schroeder, Walter	LOS ANGELES	CA	REUTHER, BLAN	53600	CHRON LYMPHOCYTIC LEUK	MEDICARE (TRANSMERICA)	DER-APPL	DENIED	07/24/92
7/21/92	Chen, Gary	CAN FRANCISCO	CA	VERNER, CHERYL	53623	ANEMIA	CA PACIFIC MEDICAL GROUP	P/A	DENIED	07/21/92
10/27/92	McKinn, Richard	DENVER	CO	HILLS, GEORGE	53622	COLON CANCER	MEDICARE	ORIG CLM	DENIED	06/14/92
3/04/92	Carmath, John	EMERSON	CO	HILLS, GEORGE	53622	RIV, UNSPECIFIED	MEDICARE	ORIG CLM	DENIED	06/04/92
06/15/92	Dunbar, Serfield	MUTMAN	CT	RAHL, DONALD	51022	NEPHRITIS/NEPHROTIC SYND	OVERSIGHTED GAP BROKERAGE	ORIG CLM	DENIED	06/15/92
01/20/92	Bluck, Gary	GREENWICH	CT	ROSENBERG, DENMAN	51025	AIDS, UNSPECIFIED	PHYSICIANS HEALTH SERVICE	ORIG CLM	DENIED	02/04/92
01/21/92	Liffin, Lawrence	WASHINGTON	DC	ASHE, ROBERT	51026	ANEMIA	MEDICARE	ORIG CLM	DENIED	01/21/92
01/09/92	D'Angelo, James	WASHINGTON	DC	ASHE, ROBERT	51026	MYELODYPLASTIC SYNDROME	MEDICARE	DER-APPL	DENIED	03/10/92
02/07/92	Killar, William	NEWARK	DE	PIETRE, DAVID	51920	CHRONIC RENAL FAILURE	TAT-STATE HAN	ORIG CLM	DENIED	02/10/92
03/10/92	Morris, Frank	DOVER	DE	PIETRE, DAVID	51920	CHRONIC RENAL FAILURE	EMPIRE BC/BS	ORIG CLM	DENIED	03/17/92
04/20/92	Zawistaw, Matthew	PAJAMA CITY	FL	MART, LYNE	52050	ANEMIA	MEDICARE	DER-APPL	DENIED	04/20/92
01/15/92	Sperti, Paul	S. MIAMI	FL	MIXSON, TIL, WILLIAM	52120	WALDENSTROM'S SYNDROME	EMPIRE BC/BS	ORIG CLM	DENIED	01/17/92
02/19/92	Komocite Solutions,	ORLANDO	FL	ROSLAND, PAUL	52121	RIV, UNSPECIFIED	AMERICAN HERITAGE LIFE	DER-APPL	DENIED	08/05/92
02/13/92	Cummins, Charles	GAINESVILLE	FL	JACOB, BARBARA	52122	OVARIAN CANCER	MEDICARE	ORIG CLM	DENIED	03/20/92
01/15/92	Tree, Terrence	NORTH MIAMI BEACH	FL	JAMISON, SHARON	52123	RIV, UNSPECIFIED	ASTA LIFE AND CASUALTY	DER-APPL	DENIED	01/15/92
06/04/92	Sator, Kumer	POMPAHO BEACH	FL	JAMISON, SHARON	52123	CHRONIC RENAL FAILURE	MEDICARE	ORIG CLM	DENIED	06/04/92
07/15/92	AMBIODA, NOY	ORLANDO	FL	CAMPBELL, ROBIN	52124	OVARIAN CANCER	MEDICARE	ORIG CLM	DENIED	07/20/92
08/12/92	MOROSSE, REBECCA	ALPHONSO SPRINGS	FL	CAMPBELL, ROBIN	52124	BREAST CANCER	AMERICAN MEDICAL SECURITY	ORIG CLM	DENIED	08/10/92
08/13/92	Ocala Oncol. Ctr.,	OCALA	FL	DETT-TOBES, CHARLES	52127	APLASTIC/REFRACT ANEMIA	MEDICARE	DER-APPL	DENIED	08/13/92
03/20/92	Wheley, William	ATLANTA	GA	SCOTT, LECIA	52025	LUNG CANCER	MEDICARE	ORIG CLM	DENIED	05/28/92
05/26/92	LEVET, MORRIS	HONOLULU	HI	LEWIS, CHRISTIA	53223	MULTIPLE MYELOMA	KATZEN PERMANENTE	P/A	DENIED	05/26/92

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03/12/92	Univ of IA Hospital,	IOA CITY	IA	MARTIN, EUGAN	52427	52427	CHRONIC RENAL FAILURE	TRAVELERS		ORIG CLM	DENIED	22	04/03/92
06/11/92	Carl, Llim-son	CHICAGO	IL	BLAKEMORE, RACHEL	52423	52423	CHRONIC RENAL FAILURE	MEDICARE		ORIG CLM	DENIED	0	06/11/92
01/10/92	Emilio, Catherine	CHICAGO	IL	CHEVY, PETER	52421	52421	AIDS, UNSPECIFIED	IL MEDICARE COMM HLTH PLAN		ORIG CLM	DENIED	3	07/13/92
02/27/92	Strom, Sheldon	OKA PARK	IL	CHEVY, PETER	52421	52421	CHRONIC RENAL FAILURE	MEDICARE		ORIG CLM	DENIED	4	03/02/92
05/19/92	Levy, Robert	BOSTON	MA	SMALL, EUGAN	51020	51020	PROSTATE CANCER	MEDICARE		DEN-APPL	DENIED	10	05/29/92
3/10/92	Allerton, Jeff	BOSTON	MA	BOND, ADA MARIA	52126	52126	CHRONIC RENAL FAILURE	MEDICARE		ORIG CLM	DENIED	3	01/13/92
06/29/92	MILLER, KENNETH	SLUET	MO	WILLIAMS, MARK	51927	51927	MULTIPLE MYELOMA	MEDICARE(PA RES)		ORIG CLM	DENIED	3	07/02/92
07/15/92	Collins, Margerita	ROCHESTER HILLS	MI	MITCHELL, JAMES	52623	52623	MYELOID/PLASTIC STROMA	BC/RS MI		P/A	DENIED	5	07/20/92
07/15/92	Rosenberg, Mark	MINNEAPOLIS	MI	SCOTT, BRENDA	52620	52620	POLYCYSTIC KIDNEY	BC/RS IA		ORIG CLM	DENIED	0	01/15/92
06/28/92	Pendergrass, Kelly	VANALAS CITY	MO	WARREN, R. LANCE	53121	53121	MYELOID/PLASTIC STROMA	PROVIDENCE		ORIG CLM	DENIED	0	06/28/92
05/29/92	Lundke, Dan	ST. CHARLES	MO	BLAKEMORE, BARBARA	53124	53124	MYELOID/PLASTIC STROMA	MEDICARE(SEN. AMERICAN)		ORIG CLM	DENIED	68	06/23/92
07/30/92	Lundke, Dan	ST. CHARLES	MO	BLAKEMORE, BARBARA	53124	53124	MYELOID/PLASTIC STROMA	BC/RS OF MO		DEN-APPL	DENIED	0	07/20/92
07/26/92	Brown, Randy	ST LOUIS	MO	BLAKEMORE, BARBARA	53124	53124	ACUTE MYELOID LEUKEMIA	LANCER & ASSOCIATES		P/A	DENIED	0	07/24/92
08/27/92	Henderson, Harold	JACKSON	MS	HART, LYRNE	52050	52050	ANEMIA	MEDICARE		ORIG CLM	DENIED	0	08/23/92
07/07/92	Block, Bryd	LIBBY	MT	DEZELLE-PTIC, RPA, SHARON	53026	53026	CHRONIC RENAL FAILURE	AMERICAN NATIONAL		ORIG CLM	DENIED	3	07/10/92
06/10/92	Berry, William	SALETON	NC	WILLIAMS, PAUL	52400	52400	LYMPHOMA	MEDICARE		ORIG CLM	DENIED	56	06/05/92
06/21/92	De Castro, Carlos	DURHAM	NC	WILLIAMS, PAUL	52400	52400	MYELOID/PLASTIC STROMA	BANKERS LIFE		P/A	DENIED	0	06/21/92
06/23/92	BEED, ALLEN	LINCOLN	NE	CLOUGH, MARK	52626	52626	MYELOID/PLASTIC STROMA	MEDICARE		DEN-APPL	DENIED	3	06/28/92
05/03/92	L. L. Thomas	SOUTH OMAHA	NJ	SINGH, MARINA	51300	51300	MYELOID/PLASTIC STROMA	U.S. HEALTH CARE		ORIG CLM	DENIED	1	03/04/92
06/05/92	Kallich, Marsha	SHIRLAND PARK	NJ	GUDDI, JOE	51322	51322	AIDS, UNSPECIFIED	COMED HMO		ORIG CLM	DENIED	0	06/05/92
07/08/92	WELBURN, MARK	NEW BRUNSWICK	NJ	KAZIM, MARK	51521	51521	CHRONIC RENAL FAILURE	XIP-RUTHERS MED. PLAN		ORIG CLM	DENIED	0	07/08/92
05/26/92	Johnson, Gerald	MOUNTAINTIDE	NJ	KAZIM, MARK	51521	51521	CHRONIC RENAL FAILURE	XIP-RUTHERS MED. PLAN		ORIG CLM	DENIED	0	05/26/92
02/07/92	Shah, Mariah	JAYNE	NJ	LIGORIT, PHIL	51522	51522	MYELOID/PLASTIC STROMA	MEDICARE		ORIG CLM	DENIED	0	02/07/92

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DATE OF CALL	SALES	CITY	STATE REPRESENTATIVE	ORTHO PRODUCT LINE	TERRITORY	DIAGNOSIS	INSURER	PAGE	ORIGINAL STATUS	CURRENT STATUS	DAYS	DATE OF REBUTAL
06/17/92	DE GREEN, PETER	LANCASTER	PA	GOOD, DORIE	51525	MULTIPLE MYELOMA	MEDICARE		DEN-APPL	DENIED	0	06/17/92
06/17/92	DE GREEN, PETER	LANCASTER	PA	GOOD, DORIE	51525	LUNG CANCER	MEDICARE		DEN-APPL	DENIED	0	06/11/92
05/29/92	Center Cancer Tx/Hes,	COLUMBIA	SC	SEXTON, THOMAS	51234	BREAST CANCER	MEDICARE		ORIG CLM	DENIED	0	06/20/92
04/20/92	Verbeemiller, Kathleen	ABERDEEN	SD	MEDLOCK, JR, OLIVER	51723	CHRONIC RENAL FAILURE	UNION BANKERS		P/A	DENIED	0	04/20/92
07/15/92	CJENARIZ,	HOUSTON	TX	SMITH, DAN	52000	AIDS, UNSPECIFIED	AT&T		P/A	DENIED	0	07/15/92
05/09/92	Gooden, Fernando	EL PASO	TX	SCALLAN, MAC	52022	DIABETES MELLITUS	UNION FIDELITY LIFE INS.		ORIG CLM	DENIED	1	05/09/92
06/07/92	Nelli, James	AUSTIN	TX	ROMANET, MAC	52022	LEUKEMIA, UNSPECIFIED	PRUDENTIAL		ORIG CLM	DENIED	0	06/07/92
06/18/92	STERNACAR, #	DALLAS	TX	CELLANAT, RAND	53120	HIV, UNSPECIFIED	CENTRAL STATES NEW FUND		DEN-APPL	DENIED	0	06/18/92
06/11/92	Moore, Michael	DALLAS	TX	RINGER, KIMBERLY	53126	WALN CANCER	PRUDENTIAL		P/A	DENIED	5	06/11/92
02/04/92	Anthony, Fred	DALLAS	TX	RINGER, KIMBERLY	53126	TRICHOCYTHERIA	NATIONAL FINANCE INC.		ORIG CLM	DENIED	57	04/01/92
06/06/92	Allen, Brady	DALLAS	TX	RINGER, KIMBERLY	53126	AIDS, UNSPECIFIED	MEDICARE		ORIG CLM	DENIED	2	06/06/92
07/10/92	Stamato, ROSAU	DALLAS	TX	RINGER, KIMBERLY	53126	AIDS, UNSPECIFIED	CENTRAL STATES NEW FUND		ORIG CLM	DENIED	12	07/22/92
06/10/92	McKay Dee Howe CAMP,	ODEN	UT	BARTON, MICHAEL	53820	CHRONIC RENAL FAILURE	MEDICARE		ORIG CLM	DENIED	0	06/10/92
03/11/92	McGee, Richard	ELWING	WA	MARK, PAUL	53823	MYELOPROLIFERATIVE DISORD	MEDICARE		ORIG CLM	DENIED	27	04/07/92
03/16/92	TEMPLETT, LAURENCE	BURLINGTON	VT	KIMMEL, JOSEPH	52021	ANEMIA	MUTUAL SERVICE LIFE		P/A	DENIED	6	03/26/92
03/06/92	Chapman, George	MARTINEBURG	WY	WILLIAMS, MARK	51927	CHRONIC RENAL FAILURE	MEDICARE		ORIG CLM	DENIED	5	03/11/92

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FINANCIAL ASSISTANCE PROGRAM (FAP™)

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FINANCIAL ASSISTANCE PROGRAM (FAP)

USAGE SUMMARY

- 1991: 235 PATIENTS ON FAP
- JANUARY - JULY 1992: ALREADY 301 PATIENTS ON FAP!
- \$1,987,200 FREE PROCRIT PROVIDED THROUGH FAP
- 833 Application have been received since program inception
 - 69% were approved
 - 31% were denied
- Of the 258 denials:
 - 79% due to insurance coverage
 - 21% due to excess income

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FINANCIAL ASSISTANCE PROGRAM

PROCEDURES

- 1) FAP reviews application immediately upon receipt.
- 2) If insured, will pass on to PROCRIline to assist with reimbursement opportunities. If uninsured, less than \$30,000 income and little savings/assets, patient is qualified. (Patients are allowed to own a home.)
- 3) FAP will explore publically funded programs that patient may be eligible for (i.e., State AIDS Drug Assistance Plans, EPIC for elderly in NY). If the program requires form enrollment and fees, the patient may decline to enroll. If so, FAP will supply ongoing free PROCRI therapy. If they do enroll, FAP will supply free PROCRI therapy until the other insurance program is in place.
- 4) If uninsured and income is greater than \$30,000, FAP will review the application further. If unusual or insurmountable difficulties are involved, exception may be made and patient may be eligible for free PROCRI.
- 5) Eligible patients will receive 60 days of therapy shipped to the physician.
- 6) Prior to the end of the 60-day period, FAP will contact the office to determine status of the patient (Is the patient still on PROCRI? Has the dose changed?)
- 7) If appropriate, FAP will arrange for another 60 day therapy to be shipped to the physician.
- 8) If patient depletes the 60-day supply prior to FAP calling due to dosing changes, the physician should contact FAP to notify them of the dosing change and request additional drug.
- 9) Patient must be re-qualified every 6 months.
- 10) It is important that you do not present a set income level as one of the criteria for eligibility as this may deter physicians from utilizing the program.

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FINANCIAL ASSISTANCE PROGRAM

STRATEGY

This program should be positioned differently with each type of customer to fit their needs. The following are benefits to the different customer groups that should be pointed out in your presentations:

- **Physicians/Nurses**
 - Provides free treatment to uninsured patients
 - Enables their patients to receive needed treatment regardless of insurance status
- **Hospital Pharmacists**
 - Patients admitted to hospital can use free PROCrit from FAP instead of hospital inventory --> decreases pharmacy and hospital cost
 - Public hospitals required to provide treatment to patients regardless of insurance status can have these patients enrolled in FAP --> decreases pharmacy and hospital cost
- **Home Health Care**
 - Allows them to accept uninsured patients for treatment as added service to their physicians
- * **Do not use set income criteria in presentations**

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FINANCIAL ASSISTANCE PROGRAM (FAP)

QUESTIONS & ANSWERS

Q. What are the criteria for eligibility?

A. The only strict criteria is that the patient is uninsured and is non-dialysis. As far as income is concerned, there is no strict criteria. \$30,000 is used as a reference point. If patients earn over \$30,000, he/she is not automatically denied. FAP reviews all the circumstances surrounding the case. If there are unusual or insurmountable difficulties involved, exceptions may be made.

For this reason, you should not quote any income criteria when presenting this program. Stating a figure may seem exclusionary and may deter physicians from utilizing this program.

Q. Most hospitals do not allow patients to bring in drug. How can a FAP patient get PROCRIT when he is in the hospital?

A. If a patient is admitted, the physician can arrange to have a supply of PROCRIT shipped to the hospital for the patient. Thus, the patient does not withdraw drug from the hospital pharmacy inventory, resulting in cost savings for the pharmacy. The same arrangement can be made with home health care agencies. If an HHC is administering the drug and the physician wants it shipped to the HHC, he can note that on the application.

Q. What is the process and how long does it take for a decision on the application?

A. FAP applications are reviewed as soon as it is received. If there is an insurer listed, FAP will get PROCRITline involved to try to obtain reimbursement through the insurer. (Note in the FAP Summary that 74% of the denied cases were due to insurance coverage.) If a patient qualifies and there is no insurance listed, FAP will investigate as to whether there are any publically funded programs available, such as AIDS Drug Assistance Plan (ADAP) in New York, PACE in Pennsylvania, etc. If so, FAP will call the office to inform them and the patient of this availability. If the program requires enrollment fees, the office or patient may decline to apply, in which case FAP will provide free drug for this patient. If the program is free, they are directed to use that program.

The physician receives notification within two weeks of receipt of application. FAP will also notify the appropriate Product Specialist via Voice Mail. Drug is then shipped within a week of decision.

If there is a special need for quicker turn-around, please call Bruce Williams or Jennifer Ng and they can have Pracon expedite the case and have a decision within a week. However, such situations should be exceptions.

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COST SHARING PROGRAM (CSP)

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COST SHARING PROGRAM (CSP)

USAGE SUMMARY

- **32 CLAIMS FOR 1991**
- **1991 DISBURSEMENTS: \$40,664**
 - INSURANCE COMPANY - 34%
 - PATIENT - 31%
 - PHARMACIES - 16%
 - HMO - 6%
 - PHYSICIANS - 6 %
 - HOSPITAL - 3%
 - EMPLOYER/SELF INSURED FUND - 3%
- **5 CLAIMS FOR 1992 RECEIVED ALREADY**

* Note: Claims were expected to be low for 1991, the first year of product launch. Programs were not widely known until later in the year resulting in less patients on drug long enough to reach cap. Full utilization in 1992 will not be known until late 1993 since claims can be filed up to 12 months after the year of use.

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COST SHARING PROGRAM (CSP)

ENHANCEMENTS

- REIMBURSEMENT RATE INCREASED FROM NET COST TO DISTRIBUTOR (NCD) + 10% TO **AWP**
- CALCULATION RATE FOR CAP INCREASED FROM NCD + 10% TO **AWP**
- CAP REMAINS \$8,500
- PATIENTS REACH CAP EARLIER!

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COST SHARING PROGRAM (CSP)

CALCULATIONS

All calculations are now based on AWP. To calculate cap levels, we must first take a look at the AWP values for each strength:

- **AWP VALUES ARE AS FOLLOWS:**

- 10,000 U/mL = \$114.00/vial
- 4,000 U/mL = \$ 48.00/vial
- 3,000 U/mL = \$ 36.00/vial
- 2,000 U/mL = \$ 24.00/vial

For a patient on 10,000 Unit vials, calculations are:

- $\$8,500 \text{ Cap} + \$114 \text{ AWP per vial} = 74.56 \text{ vials (or 746,000 Units)} \rightarrow 75 \text{ vials}$
- * Patient on 10,000 Unit vials will reach cap after 75 vials
- * Patient on 10,000 U/mL T.I.W. will reach cap in 25 weeks:
 $75 \text{ vials} + 3 \text{ vial/week} = 25 \text{ weeks}$

For a patient on 4,000 U vials, calculations are:

- $\$8,500 \text{ Cap} + \$ 48 \text{ AWP per vial} = 177 \text{ vials (708,000 Units)}$
- * Patient on 4,000 Unit vials will reach cap after 177 vials
- * Patient of 8,000 U TIW (2 vials of 4,000 U/mL) will reach cap in 29 weeks:
 $177 \text{ vials} + 6 \text{ vials/week} = 29 \text{ weeks}$

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COST SHARING PROGRAM

STRATEGY

This program can benefit many different customer groups. When presenting the Cost Sharing Program, be sure to include the following benefits for each group:

- **Physicians/Nurses**
 - Offsets cost to their patients; drug is more affordable --> greater compliance
 - Encourages insurers to reimburse knowing they have a limited liability
 - Physicians eligible for 20% co-pay reimbursement
- **Hospital Pharmacists**
 - Maintaining PROCRIT as the brand allows patient to reach cap --> offsets cost to patient, insurer, and community (taxpayers)
 - Hospitals also eligible for 20% co-pay reimbursement
- **HMOs**
 - Limits their reimbursement liability per patient
- **Retail Pharmacies**
 - Eligible for co-pay reimbursement
 - For patients on limited drug plans, CSP frees up funds for other needed drug therapies
- **Patients**
 - Guaranteed not to pay more than \$8,500 (AWP) per calendar year
 - Eligible for co-pay reimbursement
 - For patients on limited drug plans, CSP frees up funds for other needed drug therapies
- **General Public/Community**
 - Eases burden on public health costs
 - Reimbursement to Medicare/Medicaid and other public insurance programs --> lower cost to taxpayers

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COST SHARING PROGRAM

QUESTIONS & ANSWERS

- Q. How does the new AWP-based calculations change the cap and how is this calculated?
- A. The cap will remain the same -- at \$8,500. The cap amount of \$8,500 and reimbursement rate are both based on AWP. Calculations are included in previous pages for your background information only. You should not get involved in calculations with customers. If they have any questions or need help in determining a patient's status regarding the cap, they should call the CSP 800 #. By getting involved with numbers and calculations, you can lose focus of your objective of presenting the benefits of the program and the importance of using PROCRIT only for nondialysis patients.
- Q. What is the best way to have physicians utilize this program?
- A. Leave a supply of brochures for the office and instruct them to hand one out to patients as soon as PROCRIT therapy is initiated. The patient will then know about this program and have an 800 # to contact. If patients call to receive the CSP Folder (containing claim forms, "Notice to Claims Processor" orange sticker, magnet, and rolodex card), they can assist us by informing their insurers about this program. This should encourage insurers to reimburse patients, knowing that their liability is capped, and should also influence them to "prefer" PROCRIT over the other brand.
- Q. How long does it take to pay a claim?
- A. If a claim is received with complete documentation (receipts, billing records, etc.), CSP can pay the claim within 2 weeks. The process is that upon receipt of a claim, they contact all parties involved in a case to confirm quantity used and to ensure that PROCRIT was the brand dispensed.
- Q. When should the patient, physician, or other potential beneficiaries call CSP?
- A. The office should instruct the patient to call as soon as possible, preferably upon initiation of PROCRIT therapy, so that they can receive all the forms up front. This will let them know what is needed to complete the claims form and ensure that they are tracking their usage. The folder also serves as a place to retain all receipts. All potential beneficiaries are encouraged to call as questions arise. However, **claims should not be submitted until after the cap is met.** It is preferable to receive all claims at once at the end of the year. However, CSP will process all claims as they are received. For cash flow purposes, it is understandable that claims may be submitted more frequently.

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Q. How can a hospital, pharmacy, physician, or patient benefit from CSP?

A. Insurers often cover only 80% of the cost. The remaining 20% is covered by a secondary insurer, if applicable. Otherwise, the patient, hospital, pharmacy or physician pays the 20%.

The party paying the 20% co-pay is eligible for 20% of the Cost Sharing reimbursement for the amount over the cap.

Example: The expenditures for Patient Anne E. Mia is \$10,500 (based on AWP) in a calendar year. The total eligible reimbursement for Anne is \$2,000. The insurer paid 80% and Dr. Goodheart carried the other 20%. The insurer is due \$1,600, which is 80% of \$2,000. Dr. Goodheart is due \$400, which is 20% of \$2,000.

The Cost Sharing Program Summary (following this section), lists the categories of claimants so far. You can see that the beneficiaries (under "Submitter" column) were 3rd Party Insurers, HMOs, patients, pharmacies, and physicians. The only requirement is that each party eligible for reimbursement must fill out a claim. If both the insurer and patient are eligible for reimbursement, they must both submit a claim. The patient will not automatically receive his 20% just because the insurer submitted a claim.

Q. How can a hospital benefit from this program?

A. A hospital can benefit if they picked up the cost for the co-pay. However, it is generally difficult for a hospital to realize these benefits because they usually can not track a patient's total usage. Unless the patient receives all his PROCRIT from the hospital pharmacy, the only way a hospital would know if a patient reached the cap is if the patient informed the hospital. The hospital would then have to submit a claim to obtain reimbursement. Unfortunately, this is logistically difficult so hospitals have not generally been able to benefit as much as other customer types have. However, if they are able to track usage and submit claims, they are certainly eligible.

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COST SHARING PROGRAM
REIMBURSEMENT SUMMARY

January 1992 - August 1992

<i>Product Specialist</i>	<i>Physician</i>	<i>Physician Address</i>	<i>Submitter</i>	<i>Date</i>	<i>Amount</i>
Dennis Durso	Mark Daughtery	1780 Nicholasville Road #603 Lexington, KY 40503 (606) 277-4005	BC/BS of Kentucky	1/6/92 2/19/92	\$3,762.00 4,389.00
Mark Van Buren	Lorraine Nardi	160 Union Street Poughkeepsie, NY 12601 (914) 471-2800	Community Health Plan	2/5/92 4/2/92	3,103.65 1,463.00
Paul Rowland	Steven Orman	901 S. Tamiami Trail Venice, FL 34285 (813) 484-3531	Patient	2/5/92	877.80
Mary Tidd	Robert Winters	2001 Santa Monica Boulevard, Suite 1285 Santa Monica, CA 90404 (310) 828-5525	Aetna Health Plans	2/19/92	773.20
Cynthia Kubas	David McEwan	550 S. Beretania Street Honolulu, HI 96813 (808) 537-2211	Hawaii Medical Services Association	3/13/92	1,228.92
David Callaway	Richard Olson	3514 Cedar Springs Road Dallas, TX 75219 (214) 520-1810	Patient Pruco of Texas	3/13/92 4/2/92	307.23 4,901.05

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<i>Product Specialist</i>	<i>Physician</i>	<i>Physician Address</i>	<i>Submitter</i>	<i>Date</i>	<i>Amount</i>
William Mixson, III	Leonard A. Kalman	7231 S.W. 63rd Avenue Miami, FL 33143 (305) 666-3341	Patient	5/6/92	282.15
Philip Nastasi, Jr.	Eugene Rogolsky	4849 Van Nuys Boulevard, Suite 220 Sherman Oaks, CA 91403 (213) 872-0861	Ad-R Pharmacy	5/13/92	1,406.99
Terence Gibney	Steve Miles	200 UCLA Medical Plaza Los Angeles, CA 90024 (213) 794-1274	Ad-R Pharmacy	5/15/92	231.36
Michael Von Williams	Gordon Crofoot	7737 Southwest Freeway, #725 Houston, TX 77074 (713) 995-6866	Dr. Aziz Professional Pharmacy	5/29/92	10,094.70
Jeanne Bell	F. Cole Wolford	3280 Howell Mill Road Atlanta, GA 30327 (404) 350-5776	Time Insurance Company	5/29/92	3,417.15
Craig Phillips	Dr. Rosenstock	190 JFK Circle, Suite 103 Atlantis, FL 33462 (407) 965-1864	Hematology/Oncology Associates	7/23/92	1,208.02
Joseph Guidi	Steven Fruchtman	19 E. 98th Street New York, NY 10029 (212) 289-3466	Patient	8/25/92	3,217.57

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COST SHARING PROGRAM

CLAIM DENIAL SUMMARY
EPOGEN USAGE

January 1992 - August 1992

<i>Product Specialist</i>	<i>Physician</i>	<i>Physician Address</i>	<i>Submitter</i>
Carlos Ortiz-Torres	Thomas Cartwright	2725 Maricamp Road Ocala, FL 32671 (904) 732-4032	Bittings Pharmacy
William Mixsom, III	Paula Sparti	7000 S.W. 62nd Avenue, #650 South Miami, FL 33143-4715 (305) 661-1150	The Principal Financial Group
John Russell	Brian Copple	308 E. Hawaii Nampa, ID 83686 (208) 463-6030	BC of Idaho

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REIMBURSEMENT ASSURANCE PROGRAM

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MDL-OBI00062641

**REIMBURSEMENT ASSURANCE PROGRAM
USAGE SUMMARY**

PRIOR TO REIMBURSEMENT ASSURANCE PROGRAM.

- AVERAGE 270 CALLS PER MONTH TO PROCRITLINE
- AVERAGE 180 CASES PER MONTH

SINCE REIMBURSEMENT ASSURANCE PROGRAM (MAY 1):

- AVERAGE 513 CALLS PER MONTH = 90% INCREASE IN CALLS
- AVERAGE 343 CASES PER MONTH = 91% INCREASE IN CASES

AS OF AUGUST 30, 1992:

- 77 SUCCESSES (OF WHICH 38 WERE MEDICARE SUCCESSES)
- 10 DENIALS (OF WHICH 8 WERE MEDICARE)
- 259 PENDING

* Reimbursement Assurance Program Summary Report can be found at the back of this section.

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**REIMBURSEMENT ASSURANCE PROGRAM
PROCEDURES**

- 1) Customer calls for application. Reimbursement Assurance Program representatives offers to send application and informs them of the Medicare process and the potential time requirements. Application is sent with a letter restating Medicare time requirements.
- 2) Reimbursement Assurance Program representatives reviews application immediately upon receipt of written or verbal enrollment.
- 3) PROCRIline assists customer with initial claims and contact insurers if required.
- 4) 45 days after enrollment, program representative calls the customer to determine status of claims.
- 5) If denied, PROCRIline will assist with the appeals process.
- 6) 45 days later, representative contacts customer to determine status of appeals.
- 7) If appeal is denied, customer is instructed to submit proper forms and documentation for replacement drug.
- 8) Upon receipt of required documentation, letter is sent within 7 days notifying the customer that replacement drug will be shipped within 2 weeks.

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REIMBURSEMENT ASSURANCE PROGRAM

STRATEGY

- **USE WITH ALL PURCHASING PHYSICIAN OFFICES AND HOME HEALTH CARE ORGANIZATIONS:**
 - Customer can start patients based on medical need and not reimbursement status
 - Customer is assured to recoup any losses through replacement product
 - Customer gains comfort in obtaining reimbursement through our assistance
- **USE WITH CUSTOMERS FOR ON-LABEL INDICATIONS:**
 - Customer gains comfort in using PROCRIT through successful experience with reimbursement
 - Customer gains awareness of and experience with Ortho Biotech reimbursement services
- **PROCRIT IS THE ONLY PRODUCT TO PROVIDE SUCH GUARANTEES FOR NON-DIALYSIS USE**

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REIMBURSEMENT ASSURANCE PROGRAM

QUESTIONS & ANSWERS

Q. To offer a truly risk-free guarantee program, can we provide free PROCRIT up front or on consignment so that physician offices can start the reimbursement process without having to pay for drug?

A. As you may know, Medicare does not prior approve therapies. Instead, they require that the drug be purchased and the service rendered in order for a claim for reimbursement be filed. We understand that customers would be more willing to start PROCRIT therapy if they were given the drug free up front. However, it would be legally risky for us to do this.

Obtaining free drug and then submitting claims would be asking for reimbursement for something they never paid for. This would be committing insurance fraud. If we provided the free drug and assisted with the claims, we would be accomplices in this illegal activity. Therefore, we will not be offering such a program.

Q. Medicare often takes a long time to decide a case. Physicians end up extending many thousands of dollars before the Reimbursement Assurance Program replace drug. Why can't we replace drug after the first denial for Medicare cases?

A. The reason we do not offer such a service is because approximately 65% of the claims are approved upon appeal. Often, the initial claim denial is due to a clerical error or misunderstanding. Upon appeal, it can be resolved successfully. If we were to replace drug upon first denial without requiring an appeals process, we would be needlessly replacing drug for approximately 65% of cases that would have received approval upon appeal.

IMPORTANT: This program may not be appropriate for all physician. You need to select the appropriate targets to offer this program. Physicians with many PROCRIT candidates would be a good target because if a patient is denied reimbursement and we provide replacement PROCRIT, the physician could use it on another patient who is reimbursable and recoup his/her costs.

Physicians with many candidates may also be receiving reimbursement for other patients which would help the cash flow.

Physicians with **only** Medicare candidates may not be good targets. Since it may take anywhere from 2 to 5 months for Medicare to complete the required process, some offices may not be able to bear the expense for the time period. Therefore, you need to let them know the potential time requirement up front. If they understand the time and financial outlay required, they can make the decision that is right for their practice.

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Q. Can we reimburse with cash instead of product?

A. If we were to reimburse with cash, this program would be extremely costly to manage and we would not be able to offer this on a widescale. You would be limited to the number of accounts you can offer it to and they would be limited to the number of patients they can enroll. Therefore, the decision was made to reimburse with product.

Q. Can we extend this program to hospitals?

A. This is a very common request. We are exploring this possibility by field testing this program in various institutions. At this time, we do not have all the answers to how this program would be implemented in institutions. As you know, institutional physicians and pharmacists generally do not get involved with reimbursement. They will not know who is reimbursed and who is not. If the physician and/or pharmacist likes the program, they will ask you to speak to reimbursement people. You may then have to track down various Social Workers in all the outpatient clinics and also work the administration office or other billing areas to implement this program. Until we have some more definitive answers, we will only extend it on a pilot basis. If you have a hospital in which you feel you would like to test this program, call Jennifer Ng or Bruce Williams to discuss this possibility.

Q. How can I position this program with Home Health Care Organizations?

A. Certain Home Health Care (HHC) agencies may not find great value in this program initially since many of them have their own professional reimbursement staff. In addition, while they may occasionally accept high reimbursement risk patients as a favor to the physician, they generally do not accept such patients. However, if positioned as a safety net, just in case they are denied reimbursement, they would find value in being assured that they can recoup costs through replacement drug.

Another strategy is to position this program as a service they can in turn extend to physicians. By being assured of replacement product, a Home Health Care agency can now accept a patient without going through a reimbursement check prior. This will result in the patient receiving treatment when needed and not having to wait for an insurer's approval.

Please note that Medicare does not reimburse for PROCRIT administered by home health care agencies. PROCRIT must be procured and administered by the physician.

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ORTHO BIOTECH
 REIMBURSEMENT ASSURANCE PROGRAM
 STATUS OF PATIENT CASES
 05/01/92 - 08/31/92

STATE	TOTAL	SUCCESS	DENIED	PENDING	WITHDRAWN
AL	10	7	1	1	
AK	3	3			
CA	17	4	2	2	
CO	1	1			
CT	6	18	1	1	1
DE	1	1			
FL	3	11			
GA	1	1			
IL	1				
IN	1				
IA	1				
KS	1				
LA	1				
MD	1				
ME	1				
MI	1				
MN	1				
MO	1				
NC	1				
ND	1				
NH	1				
NJ	1				
NM	1				
NY	1				
OH	1				
OK	1				
OR	1				
PA	1				
RI	1				
SC	1				
SD	1				
TN	1				
TX	1				
VA	1				
WA	1				
WI	1				
WV	1				
TOTAL	353	77	10	259	7

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PAGE: 1

ONTARIO BIOTECH REIMBURSEMENT ASSURANCE PROGRAM
01/01/91-06/31/92

DATE OF BIRTH	ORIGINAL STATUS	CURRENT STATUS	PHYSICIAN RESIDING	CITY	ST	REP	PAT LIT	DIAGNOSIS	PRIMARY INSURANCE	LIFE & ACCIDENT	SECONDARY INSURANCE	DATE SHIPPED	QTY SHIP	DOSE (ML)
01/01/68	CLM	PENDING	Wm. C. Old	Huntsville	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		3,000	
01/01/68	CLM	SUCCESS	Wm. C. Old	Huntsville	AL	52023	WGS	CHRONIC RENAL FAILURE	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	AS	AP-PLASTIC/REFRACT ANEMIA	MEDICARE		MASSACHUSETTS MUTUAL LIFE		13,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	CLK	CHRONIC RENAL FAILURE	MEDICARE		MASSACHUSETTS MUTUAL LIFE		13,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	CLK	CHRONIC RENAL FAILURE	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING	Wm. C. Old	Birmingham	AL	52023	WGS	HEPATIC ENCEPHALOPATHY	MEDICARE		MASSACHUSETTS MUTUAL LIFE		4,000	
01/01/68	CLM	PENDING</												

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ONTARIO BIOTECH REIMBURSEMENT ASSURANCE PROGRAM
01/01/91-06/31/92[illegible]

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DATE OF REGISTER	STATUS	CURRENT STATUS	PHYSICIAN	CITY	ST	REP	PAT INIT	DIAGNOSIS	PRIMARY INSURANCE	SECONDARY INSURANCE	POSE (ML)	QTY SHIP	DATE SHIPPED
06/03/92	ORIG CLM	SUCCESS	MCCOY, P.	Tampa	FL	52122	JH	MYELOID PLASTIC SYNDROME	METACID	MEDICARE	3,000	0	
06/03/92	ORIG CLM	SUCCESS	AUM, G.	MOBILE	AL	52122	JK	MYELOID PLASTIC SYNDROME	MEDICARE	MEDICARE	0	0	
06/03/92	ORIG CLM	SUCCESS	ZIGLER, R.	DETROIT	MI	52122	JK	MYELOID PLASTIC SYNDROME	MEDICARE	MEDICARE	0	0	
07/23/92	DEN-APPL	PENDING	AMBI, N.	FT Lauderdale	FL	52123	SV	HIV REPAIRMENT	BENEFIT PLAN	MEDICARE	6,000	0	
06/12/92	DEN-APPL	PENDING	METERSON, W.	DELAIR BEACH	FL	52123	J1	CHRONIC RENAL FAILURE	MEDICARE	MEDICARE	1,000	0	
06/12/92	DEN-APPL	PENDING	METERSON, W.	DELAIR BEACH	FL	52123	NQ	CHRONIC RENAL FAILURE	MEDICARE	MEDICARE	4,000	0	
06/12/92	DEN-APPL	PENDING	METERSON, W.	DELAIR BEACH	FL	52123	AI	CHRONIC RENAL FAILURE	MEDICARE	MEDICARE	4,000	0	
06/12/92	DEN-APPL	PENDING	METERSON, W.	DELAIR BEACH	FL	52123	MJ	CHRONIC RENAL FAILURE	MEDICARE	MEDICARE	4,000	0	
06/12/92	DEN-APPL	PENDING	METERSON, W.	DELAIR BEACH	FL	52123	JL	CHRONIC RENAL FAILURE	MEDICARE	MEDICARE	4,000	0	
06/01/92	ORIG CLM	SUCCESS	Knight, E.	Rockledge	FL	52123	TV	CHRONIC RENAL FAILURE	MEDICARE	MEDICARE	10,000	0	
06/16/92	ORIG CLM	PENDING	Goshady, K.	Rockledge	FL	52124	SN	LYMPHOMA	MEDICARE	MEDICARE	4,000	0	
07/01/92	ORIG CLM	PENDING	Garratt, Jr., P.	O'Landos	FL	52124	NQ	PROSTATE CANCER	MEDICARE	MEDICARE	4,000	0	
07/31/92	ORIG CLM	PENDING	ANDREWS, B.	DELAND	FL	52124	JHM	MYELOID PLASTIC SYNDROME	MEDICARE	MEDICARE	6,000	0	
07/31/92	ORIG CLM	PENDING	ANDREWS, B.	DELAND	FL	52124	REN	MYELOID PLASTIC SYNDROME	MEDICARE	MEDICARE	5,000	0	
06/03/92	DEN-APPL	PENDING	Smith, D.	Vincent Park	FL	52124	WH	THROMBOCYTIC LEUKEMIA	MEDICARE	MEDICARE	4,000	0	
06/03/92	DEN-APPL	PENDING	Smith, D.	Vincent Park	FL	52124	CK	LUNG CANCER	MEDICARE	MEDICARE	0	0	
06/04/92	ORIG CLM	PENDING	Knight, E.	Rockledge	FL	52124	TD	LEUKOPENIA/NUTROPENIA	MEDICARE	MEDICARE	0	0	
06/04/92	ORIG CLM	PENDING	Knight, E.	Rockledge	FL	52124	NJ	LUNG CANCER	MEDICARE	MEDICARE	0	0	
06/04/92	ORIG CLM	PENDING	Knight, E.	Rockledge	FL	52124	JH	OVARIAN CANCER	MEDICARE	MEDICARE	4,000	0	
06/04/92	ORIG CLM	PENDING	Knight, E.	Rockledge	FL	52124	BS	CERVICAL CANCER	MEDICARE	MEDICARE	7,500	0	
06/04/92	ORIG CLM	PENDING	Chill, R.	Fort Ft. Lucy	FL	52124	ES	CHRON THROMBOCYTIC LEUK	MEDICARE	MEDICARE	4,000	0	
06/04/92	ORIG CLM	PENDING	Knight, E.	Rockledge	FL	52124	EJ	CHRON THROMBOCYTIC LEUK	MEDICARE	MEDICARE	4,000	0	
06/16/92	ORIG CLM	PENDING	Knight, E.	Rockledge	FL	52124	NJAS	SQUAMOUS CELL LYMPH NODE	MEDICARE	MEDICARE	4,000	0	
06/16/92	ORIG CLM	PENDING	Knight, E.	Rockledge	FL	52124	QNC	NEOPLASIA; OUTDOOR	MEDICARE	MEDICARE	2,000	0	
07/17/92	DEN-APPL	PENDING	Smith, D.	Vincent Park	FL	52124	DS	AMEBIA	MEDICARE	MEDICARE	3,000	0	
06/15/92	ORIG CLM	PENDING	Knight, E.	Rockledge	FL	52124	NJ	OVARIAN CANCER	MEDICARE	MEDICARE	8,000	0	
06/15/92	ORIG CLM	PENDING	Garratt, Jr., P.	O'Landos	FL	52124	JH	LYMPHOMA	MEDICARE	MEDICARE	1,500	0	
06/15/92	ORIG CLM	PENDING	McCOY, P.	Altamonte Springs	FL	52124	JH	COLOR CANCER	BC/RS FL	BC/RS FL	8,000	0	
06/15/92	ORIG CLM	PENDING	McCOY, P.	Altamonte Springs	FL	52124	JH	BREAST CANCER	WASHINGTON NATIONAL	WASHINGTON NATIONAL	12,000	0	
06/22/92	ORIG CLM	SUCCESS	Becker, S.	O'Landos	FL	52125	CP	AIDS, UNSPECIFIED	ALTA HEALTH STRATEGIES	ALTA HEALTH STRATEGIES	0	0	

ORTHO 01050458
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ORTHO 01050459
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ORTHO 01050460
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ORTHO 01050462
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MDL-OBI00062655

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DATE OF BIRTH	ORIGINAL CUMULATIVE DISEASE	CURRENT CUMULATIVE DISEASE	PROVIDER	CITY	ST	REP	PAT	DIAGNOSIS	PRIMARY INSURANCE	TEMPERATURE BC/BS	SECONDARY INSURANCE	DOSE (ML)	QTY	DATE SHIPPED
01/01/55	CLM	PENDING	MT SINAI MED CENTER, AMEN	BROWNSVILLE	TX	51529	AA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	3,000	1	01/01/55
01/01/55	CLM	SUCCESS	CHAMBERLAIN, J.	DAYTON	OH	51709	LB	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	HITMAN, D.	CLEVELAND	OH	51729	LB	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	HITMAN, D.	CLEVELAND	OH	51729	LB	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	SUCCESS	MARSHALL, B.	COLUMBUS	OH	51842	GA	MULTIPLE MYELOMA	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
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01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.	SPRINGFIELD	OR	51864	GA	CHRONIC REPTAL FAILURE	BC/BS PA	97.0	BC/BS PA	7,000	1	01/01/55
01/01/55	CLM	PENDING	ALLARD, R.											

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REGIONAL TRAINING SESSION
EVALUATION FORM

1) Negotiation Seminar: Rate the Seminar

poor - 1 2 3 4 5 - outstanding

What did you like/learn from the seminar?

Would you recommend the seminar for other Product Specialists?

_____ YES _____ NO

2) Managed Health Care: Rate the seminar

1 2 3 4 5

Did the seminar address your concerns and questions about Managed Health Care ?

Do you feel more comfortable and confident dealing with Managed Care Accounts? Why or Why not?

What would you like to see more of? (ie. role-playing, etc.)

Please include any suggestions that you feel may make the seminar more helpful?

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3) Reimbursement Workshop: Rate the Seminar

1 2 3 4 5

Are you clear about our reimbursement programs and how/where they should be implemented? Why or Why not?

4) Retail Seminar: Rate the Seminar

1 2 3 4 5

Did the seminar address your concerns about retail activity? Why or Why not?

Are there any other areas that you want addressed ?

5) Dispensing Physicians: Rate the Seminar

1 2 3 4 5

Did the seminar address your concerns/questions about the Dispensing Physician? Why or Why not?

Are there areas that you feel should have been emphasized more?

Do you now understand your role in the Oncology office?

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6) Distributors Seminar: Rate the Seminar

1 2 3 4 5

Do you understand your role/job in the wholesaler setting?
Why or Why not?

Are you clear about the different classes of trade and their
impact on your business?

7) Overall:

Since you have been in the territory, what other types of
training would have better prepared you to be a Product
Specialist?

What to you feel you need more of? Less of?

What can the DMS and RTSS do to help facilitate your learning?
(please be honest and specific)

COMMENTS:

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